## 2003 FOR PROFIT CORPORATION INIFORM BUSINESS REPORT (UBR)

EXMATURE REQUIRED
SIGNATURE AND TYPED OF PRINTED HAIRE OF SIGNING OFFICER OF DIRECTOR

SIGNATURE:

	DO3 FOR PROFIFER BUSINI  MENT # P9800	ESS REPOR 00051368	RT (UBR)		APPROVED APPROVED	0113295 AV	
1. Entity Name COSMARC, INC.  Principal Place of Business 687 ALDERMAN ROAD SUITE 110 PALM HARBOR FL 34683  2. Principal Place of Business  3. Mailing Address  3. Mailing Address					FILED 03 JUL -9 PM 8: 04		
			3		SECRETARY OF STATE FALLAHASSEE. FLORIDA		
	<del></del>		<del></del>				
Suite, Apt. #, etc.			Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES		
City & Sta	te	City & State		4.	FEI Number         58-1868960         Applied Foundation           Not Applie         Not Applie	<b>─</b> ┤	
Zip	Country	Zip	Country	5.	Certificate of Status Desired		
	6. Name and Address of Current	Registered Agent	Name	7.	Name and Address of New Registered Agent	$\Rightarrow$	
AMERILAWYER			Street Add	Street Address (P.O. Box Number is Not Acceptable)			
	eria avenue Kables fl 33134		<del> </del>				
OTIME CABLES TE COTO			City	City FL Zip Code			
	e named entity submits this statement for	or the purpose of changing it	s registered office or re	egistered a	igent, or both, in the State of Florida. I am familiar with, and acc	;ept	
SIGNATURE							
	Signature, typed or printed name of registered agent	and title if applicable. (NO	TE: Registered Agent signature	required when	reinstating) DATE	}	
	TILE NOW!!! FEE IS \$550.00	1				1	
	ptember 10, 2003 Fee will be \$756 k Payable to Florida Department o	1			9. Election Campaign Financing \$5.00 May Trust Fund Contribution.  Added to Fee		
Make Chec 10.	k Payable to Florida Department of OFFICERS AND	of State  DIRECTORS	11.	, A	Trust Fund Contribution. Added to Fee: DDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	•	
Make Chec 10. TITLE NAME STREET ADDRESS	k Payable to Florida Department of	f State	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	F	Trust Fund Contribution. Added to Fee:	dition (S)	
Make Chec  10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	PD COSSABOON, JULIA D 687 ALDERMAN ROAD	of State  DIRECTORS	TITLE NAME STREET ADDRESS	Ą	Trust Fund Contribution. Added to Fee:  DDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  Change Added to Fee:	Voinition Voinit	
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	PD COSSABOON, JULIA D 687 ALDERMAN ROAD PALM HARBOR FL 34683 VSTD COSSABOON, DOUGLAS M 687 ALDERMAN ROAD	DIRECTORS  Delete  Delete  Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	A	Trust Fund Contribution. Added to Fee.  DDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  Change Added to Fee.	notification (A/03)	

Date

Daytime Phone #

TO: FLOREDA DEPORTMENT OF STATE DIVISION OF CORPORATIONS.

Subsect: Did Not Recent 1st Notice for
The following 3 corporations
They were received on July 3, 2003
All three companys are in my name
or I am Prestdent or Vice Presedent

Companges are: Cosmarc, INC.

AECI, FUC.

Elevator Consulting Services, Inc

NEW Name. For lost ?S.

Architecural Entrances & CaB Interiors.

Thank your Douglas M. CossABOON.

7/09/03.