## 2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P98000055583 Apr 24, 2000 8:00 am Secretary of State 1. Entity Name FLORIDA EXTRUDERS INTERNATIONAL, INC. 04-24-2000 90154 031 \*\*\*150.00 Mailing Address Principal Place of Business 2540 JEWELL LANE 2540 JEWETT LANE SANFORD FL 32771 SANFORD FL 32771 us US 3. Mailing Address 2. Principal Place of Business 2540 Jewett Lane DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt #, etc. Applied For 4. FEI Number City & State City & State 59-2952050 Not Applicable \$8.75 Additional Country Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) stered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. Change ☐ Addition ☐ Delete TITLE P/T/C/D TITLE NAME LEHMAN, JOEL G NAME STREET ADDRESS STREET ADDRESS 3117 PENWA CT CITY-ST-ZIP CITY-ST-ZIP LONGWOOD FL 32779 Addition ☐ Change TITLE ☐ Delete NAME NAME ELRAD. MARTIN H STREET ADDRESS STREET ADDRESS 6937 LAKE ESTATE COURT CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33496** ☐ Addition ☐ Change ☐ Delete TITLE TITI F NAME NAME LEHMAN, MARVA A STREET ADDRESS STREET ADDRESS 3117 PENWA CT CITY-ST-ZIP CITY-ST-ZIP LONGWOOD FL 32779 ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME KAHAN, DAVID L STREET ADDRESS STREET ADDRESS 25011 DUFFIELD CITY-ST-ZIP CITY-ST-ZIP **BEACHWOOD OH 44122** ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME LEWIS, SCOTT M STREET ADDRESS STREET ADDRESS 1301 E 9TH STREET CITY-ST-ZIP CITY-ST-ZIP **CLEVELAND OH 44114** ☐ Change ☐ Addition TITLE Delete AS TITI F NAME NAME MOORE, EARL S STREET ADDRESS STREET ADDRESS 2540 JEWETT LANE CITY-ST-ZIP CITY-ST-ZiP SANFORD FL 32771

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

4-14-00

407 323 3300

· Daytime Phone #