2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P9800106782 FILED Jul 07, 2000 8:00 am AA A USG SPRINKLERS, INC. **Secretary of State** 07-07-2000 90460 014 ***150.00 Mailing Address Principal Place of Business 1115 MERIDIAN AVE #1 ... S MERIDIAN AVE #1 ::AMI BEACH, FL 33139 MIAMI BEACH, FL 33139 UUUUUUUU 2. Principal Place of Business 3. Mailing Address IJIS MERIDIAN AVE IIIS MERIDIAN HVE DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State MIAMI BEACH, FL 58-2463411 Not Applicable MIAMI BEACH, FL \$8.75 Additional Zip 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MUHAN O. Box Number is Not Acceptable) 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 (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. PRESIDENT/DIRECTOR Change TITLE ☐ Delete TITLE RUTY NAHWY NAME 115 MERIDIAN AVE APTHA STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP MIAMI BEACH, FL 33B9 Change Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP ☐ Addition ☐ Change TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP" CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-1-2000

(305) 534-9454

| To the Department OF State, |
|--|
| |
| I think we had a misounderstanding in the company |
| s you never got our Change of Address, therefor I |
| never received the business Report prior to my request |
| on the phone 2 days ago. |
| write this letter to state that I never not it hotore |
| The person who I spoke to on the phone said I should write this letter to state that I never got it before May 1st, therefor I can don't have to pay the fine. |
| |
| Alexe Make sure you change our address, so we'll get the mail you are sounding us. Altached is check # 1182 for \$150.00 |
| are sounding us. |
| Attached is check # 1182 for \$15.00 |
| ! |
| -Thank You |
| Thank you Ruty Naham AA A USG-SPRINKLERS, INC |
| AA A USG-SPRINKLERS, INC |
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