

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000036198

1. Entity Name

PAUL'S DRAPERY INSTALLATIONS, INC.

R

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07-21-2000 90150 027 ***150.00

00 AUG 10 PM 12:11

Principal Place of Business

7402 CARRIER ROAD
FORT MYERS FL 33912

Mailing Address

1311 LAFAYETTE STREET
CAPE CORAL FL 33904

2. Principal Place of Business

121 EUCALYPTUS CT

Subs. Apt. #, etc.

FT MYERS BEACH

City & State

FLORIDA

3. Mailing Address

121 EUCALYPTUS CT

Subs. Apt. # etc.

FT MYERS BEACH, FLORIDA

4. FEI Number
165-0912941

Applied For
Not Applicable

Zip

33931

Country

LEE

Zip

33931

Country

LEE

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

~~SPIGEL, UTHERA, P.A.
340 HENRY AVENUE
CORAL GABLES FL 33134~~

PAUL CHRISTIN
121 EUCALYPTUS CT
FT MYERS BEACH, FL 33931

7. Name and Address of New Registered Agent

PAUL'S DRAPERY INSTALLATIONS, INC.

Street Address (P.O. Box Number is Not Acceptable)
121 EUCALYPTUS CT

City FT MYERS BEACH FL Zip Code 33931

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

Paul Christin

7/10/00

9. This corporation is eligible to elect its Intangible Tax filing requirement and elects to do so (See criteria on back)

FILE NOW! FEE IS \$500.00
After SEPTEMBER 15, 2000 Min. Fee is \$750.00
Annual Charge payable to Department of State

10. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE: ~~PRESIDENT~~
NAME: CHRISTIN, PAUL
STREET ADDRESS: 7402 CARRIER ROAD
CITY-ST-ZIP: FORT MYERS FL 33912

TITLE: VP
NAME: CHRISTIN, PAUL
STREET ADDRESS: 7402 CARRIER RD
CITY-ST-ZIP: FT MYERS, FL 33912

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
 Delete

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
 Delete

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
 Delete

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
 Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (11)

TITLE: PRESIDENT
NAME: CHRISTIN, PAUL
STREET ADDRESS: 121 EUCALYPTUS CT
CITY-ST-ZIP: FT MYERS BEACH, FL 33931

TITLE: VP
NAME: CHRISTIN, JASSE
STREET ADDRESS: 121 EUCALYPTUS CT
CITY-ST-ZIP: FT MYERS BEACH, FL 33931

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
 Change Addition

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
 Change Addition

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
 Change Addition

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
 Change Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information contained 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 567, 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 filers and signers.

SIGNATURE:

Paul Christin

7/10/00

941 765-0897

Paul Christin - Registered Agent

7/10/00

941 765-0897

CR20034 (500)