2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P9900036910 Jul 19, 2000 8:00 am Secretary of State 1. Entity Name ART HORIZONS CUSTOM FRAMING, INC. 07-19-2000 90019 038 ***158.75 Principal Place of Business Mailing Address 11940 SW 123 AVE 11940 SW 123 AVE MIAMI FL 33186 MIAMI FL 33186 2. Principal Place of Business avenue Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Applied For City & State Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LIMA, ISIDRO Street Address (P.O. Box Number is Not Acceptable) 11940 SW 123 AVE MIAMI FL 33186 Zip Code 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) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change ☐ Addition TITLE TITLE ☐ Delete LIMA, ISIDRO NAME NAME 11940 SW 123 AVE STREET ADDRESS STREET ADDRESS **MIAMI FL 33186** CITY-ST-ZIP CITY-ST-7iP ☐ Change ■ Addition TITLE ☐ Delete TITLE LIMA, LARISSA NAME NAME 11940 SW 123 AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33186** CITY-ST-ZIP ☐ Change Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME

13. I hereby certify that the information supplied with this filling 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.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-7IP

SIGNATURE REQUIRED

Date Daytime Pro

Date: 7/13/00 Time: 1:37:46 PM

ATTACHMENT P99000036910 AXXXX3335

Art Horizons Custom Framing, Inc. 13028 SW 120 Street Miami, FL 33186

Phone: (305) 259-7611 E-mail: Arthorizons@cs.com

July 13, 2000

DIVISION OF CORPORATIONS UNIFORM BUSINESS REPORT FILINGS P.O. Box 1500 Tallahassee, FL 32302-1500

RE: ART HORIZONS CUSTOM FRAMING, INC.

FEIN: 65-0954616

To Whom It May Concern:

By these means I am requesting an extension of payment for the UBR file.

When calling your offices we were informed that we should have received a UBR form in January, but we never received it until July 10th, 2000.

Enclosed please find a check in the amount of \$158.75 for the UBR file due before May 1st, 2000.

Thank you for considering our request. We will await your prompt response regarding this matter.

Thank you.

Larissa Lima

Enclosure

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