2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000054573 1. Entity Name 08-12-2002 90001 003 ***150.00 ALL SERVICE GARAGE DOORS OF FT LAUD/BOCA RATON, Principal Place of Business Mailing Address 1530 NW 62ND TERRACE 1530 NW 62ND TERRACE MARGATE FL 33063 MARGATE FL 33063 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0935077 Not Applicable Country \$8.75 Additional Zip Country Zip П 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent FRIEDMAN, MARC Street Address (P.O. Box Number is Not Acceptable) 1530 NW 62ND TERRACE MARGATE FL 33063 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (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, 2002 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. (4/02)☐ Addition ☐ Change ☐ Delete TITLE TITLE LANGLEY, JOHN E NAME NAME CR2E034 STREET ADDRESS 1530 NW 62ND TERRACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MARGATE FL 33063 ☐ Addition ☐ Change Delete TITLE TITLE NAME LANGLEY, JOHN E STREET ADDRESS 1530 NW 62ND TERRACE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP MARGATE FL 33063 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME, NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME

John E, LANGLEY SIGNATURE: N

FILED Aug 12, 2002 8:00 am Secretary of State

STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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.

Attachment # 199000054573 aug, 1, 2002

Dear Sir; we did not receive the uniform Business Report. Sincerely, John Langley