2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # P99000076260 Jul 19, 2000 8:00 am 1. Entity Name CORNERSTONE FINISHES WEST, INC. **Secretary of State** 07-19-2000 90026 006 ***558.75 Principal Place of Business Mailing Address 2960 N.W. 2ND. AVE..STE,11 2960 N.W. 2ND. AVE..STE.11 **BOCA RATON FL 33431** BOCA RATON FL 33431 Principal Place of Business laylor Road DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number HOCIDA Not Applicable \$8.75 Additional M 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name STIRLING, DANIEL Street Address (P.O. Box Number is Not Acceptable) 2960 N.W. 2ND. AVE., STE. 11 **BOCA RATON FL 33431** Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 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 SEPTEMBER 13, 2000 Min. will be \$750.00 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. 12. PD ■ Addition ☐ Delete TITLE TITLE MONTGOMERY, DAVID A NAME NAME STREET ADDRESS 2960 N.W. 2ND. AVE., STE. 11 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33431** Addition □ Change ☐ Delete TITI F TITLE STIRLING, DANIEL NAME NAME STREET ADDRESS STREET ADDRESS 2960 N.W. 2ND. AVE., STE.11 CITY-ST-7IP CITY-ST-ZIP **BOCA RATON FL 33431** ☐ Addition TITLE ☐ Delete TITLE Change WATERMAN, GEORGE O NAME NAME STREET ADDRESS STREET ADDRESS 2960 N.W. 2ND. AVE., STE.11 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33431** ☐ Addition ☐ Delete TITLE ☐ Channe TITLE HUSEMAN, RICH NAME NAME 2960 N.W. 2ND. AVE., STE.11 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **BOCA RATON FL 33431** ☐ Change ☐ Addition ☐ Delete TITLE TITLE 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 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.

56/-395-6388 Davitina Phone #