2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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FILED
Apr 15, 2003 8:00 am
Secretary of State
03-24-2003 90168 039 ***150.00

DOCUMENT # P99000089331

1. Entity Name
FABRICA INTERNACIONAL DE BLINDAJES CORP.

Principal Place of Business	Mailing Address
4420 MERCANTIL AVE NAPLES FL 34104	2121 PONCE DE LEON BLVD. SUITE 240 CORAL GABLES FL 33134

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
4707 Enterprise Ave →	SAME
Suite, Apt. #, etc. Unit 5	Suite, Apt. #, etc.
City & State Naples, Florida	City & State
Zip 34104-7064 Country USA	Zip Country

4. FEI Number 65-0971520 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

PRATS, GABRIEL
2121 PONCE DE LEON BLVD.
SUITE 240
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name Ricardo Arias
Street Address (P.O. Box Number is Not Acceptable) 4707 Enterprise Ave Unit 5
City Naples FL Zip Code 34104-7064

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 ____________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTSD ☐ Delete ARIAS-GAVIRIA, RICARDO 7419 NW 54TH STREET MIAMI FL 33166	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 4707 Enterprise Ave Unit 5 Naples, Florida 34104-7064
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete PENA, ELSA MARIA 7419 NW 54TH STREET MIAMI FL 33166	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 4707 Enterprise Ave Unit 5 Naples, Florida 34104-7064
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)