

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 27, 2005 8:00 am
Secretary of State

01-27-2005 90053 001 ***150.00

DOCUMENT # 506497

1. Entity Name

Fine Curtains, Inc.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

15215 83rd Way No.

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Palm Bch Gardens FL

City & State

4. FEI Number

592817328

Applied For

Not Applicable

Zip

33418

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name Paul Maybaum

Street Address 15215 83rd Way No.

City P.O.G.

FL

Zip Code 33418

**DO NOT WRITE
IN THIS SPACE**

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

Paul S. Maybaum

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-13-05.

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE President
NAME Paul S. Maybaum
STREET ADDRESS 15215 83rd Way No.
CITY-ST-ZIP Palm Bch Gardens FL 33418

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Paul S. Maybaum

Paul S. Maybaum

1-13-05 561-5478007

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)