FILED

2002 Uniform Business Report (UBR)

Apr 10, 2002 8:00 am Secretary of State S82103 DOCUMENT # 1. Entity Name 04-10-2002 90656 043 ***150.00 FISHER INTERIORS, INC. Mailing Address Principal Place of Business 4050 SOUTH U.S. HIGHWAY 1 4050 SOUTH U.S. HIGHWAY 1 STE #311 STE #311 JUPITER FL 33477 JUPITER FL 33477 HS 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0296322 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent -6. Name and Address of Current Registered Agent Name FISHER, DONALD BARTLEY Street Address (P.O. Box Number is Not Acceptable) 4050 SOUTH U.S. HIGHWAY 1 STE #311 JUPITER FL 33477 City 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 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (9/01) Addition ☐ Change TITLE Delete TITLE NAME FISHER, DONALD BARTLEY NAME STREET ADDRESS 4050 S. US HIGHWAY #1, STE 311 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JUPITER FL Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME FISHER, HELEN M STREET ADDRESS STREET ADDRESS 4050 S. US HIGHWAY #1, STE #311 CITY-ST-ZIP CITY-ST-ZIP JUPITER FL TITLE -Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP ☐ Change Addition TITLE ☐ Delete 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

of the corporation or the changed, or on an attach like empowered SIGNATURE: