FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

658630

(9)

DOCUMENT #

1. Corporation Name

BRITT I	LAMINATE INCORPORATE	D							
Principal Place	of Business	Mailing Address			·································	I INDIIN BIIDI DIIDI HUID AIIDE IIIII	4411 41811 814		han alan ma
% JAMES GII 3695 NW 74		% JAMES GILBERT BRITT 3695 NW 74 ST MIAMI FL 33147							
MIAMI FL 331	147				3. Date incorporated or Qualified 03/07/1980	3a. Date of Last Report 04/21/1995			
2. Principal Pla	nce of Business	2a. Mailing Address			4. FEI Number Applied For S9-2072340 Not Applicable			Applied For Not Applicable	
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required	
City & State	3	City & State			6. Election Campaign Financing			May Be to Fees	
23	0	28 Z _{(P}		Country		Trust Fund Contribution	intangible ta		
— `	Zip Country		30			8. This corporation has liability for intangible tax under s 199 Florida Statutes ☐ Yes ☐ No		100.002,	
24	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New F		Agent	
	3 . Italia 2			81	Name				
	IAMES GILBERT			82	Street Add	ress (P.O. Box Number is Not Acceptate	ole)		
	N 74 ST. El 33147			83					
				84	City		FL	85 Zıç	o Code
or register	to the provisions of Sections 607.050 ed agent, or both, in the State of Flor th, and accept the obligations of, Sec	rida. Such change was	authorized by ti	above-i ne corp	named corpo oration's boa	oration submits this statement for the pu ard of directors. I hereby accept the app	On the rest of the	anging its res s registered	agistered office agent. I am
SIGNATORE ,	Signature, typed or printed name of registered age:				nt signature retjum	ad when ruinstatingi	DATE.	D DIDECTO	DC IN 40
12.		ND DIRECTORS		3.		ADDITIONS/CHANGES TO OFF		Change	Addition
TITEE	P Britt, James Gilbert	□ DE		1 THILE					
NAME	3695 NW 74 ST.			.2 NAME	T ADDRESS				
STREET ADDRESS	MIAMI FL			.4 CITY - 5			٠٠. <u>-</u>		
CITY-ST-ZIP THLE	ST	☐ DE		1 TITLE	51-21			Change	Addition
NAME	BRITT, LYDIA			2 NAME			į	_	
STREET ADDRESS	3695 NW 74 ST.				T ADDRESS		:		ļ
CHY-ST-ZIP	MIAMI FL			4 CITY-	Į.				
TITLE	VP	☐ DE		1 TITLE				Change	☐ Addition
NAME	BRITT, RONALD GILBERT		3	2 NAME					
STREET ADDRESS	3695 NW 74 ST			3. STREE	1 ADDRESS				ļ
CITY-ST-ZIP	MIAMI FL			4 CITY -	ST-ZIP				
TITLE		DE	LETE	I. 1 TITLE	ļ			Change	Addition
NAME				I 2 NAME	ĺ				
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NAME				2 NAME					ļ
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CITY ST-7IP				4 CITY-				Char ge	☐ Addition
T:TLF		☐ DE		S 1 TITLE	ļ			~ 2.10. A.	
NAME				5.2 NAME	1				
STREFT ADDRESS					T ADDRESS				
CITY-ST-ZIP			1	6 4 CITY -	51-ZIF				

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: