FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J90800

(0)

PARADISE WOODWORKING, INC.

Mailing Address

W ROBERT K. MILLER 2975 OVERSEAS HIGHWAY MARATHON FL 33050

Principal Place of Business

% ROBERT K. MILLER 2975 OVERSEAS HIGHWAY MARATHON FL 33050-2235

FILED
Apr 30 1997 8:00am
Secretary of State

-1		

MARATHON FL 33050		MAHATHON FL 33050-2235			1				
					3. Date Incorporated or Qualified 09/03/1987		Date of Last Report 6/19/1996		
	ace of Business	2a, Mailing Address		~	4. FEI Number		+	olied For	
1 203	107 Th St. Gulf	26 30858 P	alm	Dr.	65-0012650 Not Applicab				
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired See Req				
City & State		City & State 28 Big Pine Key, Fl.		6. Election Campaign Financing \$5.00 Ma Trust Fund Contribution Added to F					
Zip 330	Country 25 U.S.A.	^{7(ρ} 3 29 33 0 4 3	Obuntry 30 ひ	.s.A.		Yes No		199.032,	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Re	gistered Agen	1		
MILL	er, robert K.		81	Name					
AAMA ALMAADIA INAINIIII			82	82 Street Address (P.O. Box Number is Not Acceptable)					
MIAN	MINON FL 33030		83		and the standard product of the transfer of th	-			
			84	City		B5	Zip C	ode	
		to control all the server to the prince of the server to t		<u></u>	poration submits this statement for the	FL	L,,-		
SIGNATURE	m familiar with, and accept the obligation of registered again	nt and title d'applicable (NO	1E: Registered Aç		red when reinstating)	DATE			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFI				
TITLE	PD	L DELETE	1.1 TOTLE			F] (Change	Addition	
NAME	HOWARTH, WALTER A.		1.2 NAME					·	
STREET ADDRESS	30858 PALM DR			T ADDRESS					
CITY-ST-ZIP	BIG PINE KEY FL	DELETE	1.4 CITY-	ST-ZIP		— П	Change	Additio	
TITLE	HALBURA BOMAB	Dittit	2.1 7(1) [nungo	L Additio	
NAME	WILBURN, RONALD J. RT.#3 BOX 410		2.7 NAME	T ADDRESS					
STREET ADDRESS	BIG PINE KEY FL		2.4 Cily						
CITY-ST+ZIP TITLE	UNITHE NEITL	DELETE	3.1 1111	- 51 - 24			Change	Additio	
NAME			3.2 NAME			_	•		
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NAME EXECUT ADOPTED			6.2 NAME	1 ADDRESS					
STREET ADORESS			6.3 STREE						
CITY-ST-ZIP			0.9 (11)	SI: #II'					

14. I do 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 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.