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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000092877 (6)

TRI-COUNTY MILLWORK, INC.

FILED Feb 27 1998 8:00am Secretary of State

Principal Place of Business		Mailing Address	Mailing Address					
PO BOX 161908		PO BOX 161908						
MIAMI FL 3	3116	MIAMI FL 33116				DO NOT WRITE IN THIS S	DACE	
1						3. Date Incorporated or Qualified	- AGE	
}						12/04/1995		1
2 Principal Pi	ace of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				65-0639363	——	Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5 Additional
-		27	1			5. Certificate of Status Desired		Required
City & State)	City & State			*	8. Election Campaign Financing		00 May Be
23		28	1			Trust Fund Contribution		ed to Fees
Zip	Country	7(p)	(p) Country			8. This corporation owes or has paid the curr		
24	25	29	30	-			Yes	□ No I
	9. Name and Address of Current	Registered Agent	1991			10. Name and Address of New Registered A	gent	·
н	ILLENCAMP, JAMES F II		8	1	Name			
	1980 S.W. 94TH ST.		-	2	Ctroot Add	dress (P.O. Box Number is Not Acceptable)		
	IAMI FL 33116		l°	2	SIFER AGO	dress (F.O. Box Multiper is Not Acceptable)		
' "			8	3				
			-	_			1221 5	
į			8	4	City	FL	85 Z	ip Code
11. Pursuant i	o the provisions of Sections 607,0502	and 607.1508, Florida Statut	tes, the abo	ve-r	named cor		changin	g its registered
office or ri	egistered agent, or both, in the State om familiar with, and accept the obligat	Florida Such change was a	authorized I	by t	he corpore	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the appo	intment	as registered
1	is territory with and accept the titinger	cina or, exection gov. obot., Fr	uncia Statut	.co				
SIGNATURE	Signature, typed or pention name of registered agent	and bile if applicable (NOT	It : Registered A	Qenl	Bignature requ	uired when reinstating) DATE		i
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	ORS IN 12
TITLE	D	DELETE	1.1 TITLE	E			Chang	e Addition
NAME	HILLENCAMP, JAMES F II		1.2 NAM	E				
STREET ADDRESS	11980 S.W. 94TH ST.		1.3 STRE	ET AC	ODRESS			
CITY-ST-ZIP	MIAMI FL 33186		1.4 CiTY	- ST -	ZIP			
TITLE	D	DELETE 211		E			☐ Chang	ge Addition
(NAME	RIVERA, TANIA		2.2 NAM	2.2 NAME		ers — July		ĺ
STREET ADDRESS	11980 S.W. 94TH ST.		2.3 STRE	ET AI	ODRESS			
CITY-ST-ZIP	MIAMI FL 33186		2. 4 CITY	/-ST-	ZIP			ļ
TITLE	DELETE 3						Chang	e Addition
NAME			3.2 NAM	E				
STREET ADDRESS			3.3 STRE	ET AE	odress			ł
CITY-ST-ZIP			3.4. CITY					
TITLE		DELETE	4.1 TITLE				Chang	ge Addition
NAME			4 2 NAM	AE.				
STREET ADORESS			4.3 STRE	ET A	DORESS			
CITY-ST-ZIP			4.4 CITY					}
TITLE		DELETE	5.1 TITLE				☐ Chang	e Addition
NAME			5.2 NAM					
STREET ADDRESS			5.3 STRE		DOBESS			1
CITY-ST-ZIP			5.4 CITY					
TITLE		DELETE	6.1 TITLE		 		Chang	e
NAME			6.2 NAM					
STREET ADDRESS			6.3 STRE		UDBESC			
! I								1
CITY-ST-ZIP	sertify that the information supplied with	this filing does not qualify f	6.4 City or the exem			n Section 119.07(3)(i). Florida Statutes, I further cel	tify 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 or an attachment with an address.

305-273.7460