Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90005 011 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000059759

1. Corporation Name

GROSSE POINTE WOODWORKING, INC.

								-	f (\$01600) 178 JOINS 16511 00115 69151 60211 0010	T MITTE INITE IN	1881 BILLIN 1881 1881	
Principal Place of Business Mailing Address								1				
2520 NORTHWEST 16TH LANE 2520 NORTHWEST 16TH LAN						Ε						
BAY 1 POMPANO BEACH FL 33064				BAY 1 POMPANO BEACH FL 33064					DO NOT WRITE IN THIS SPACE			
FOMPANO BEROTTE 55007				TOMINATO DENOTITE GOOD!				3	3. Date Incorporated or Qualifed			
							•	,	08/23/1993			
2. Principal Pl	ace of Busin	ness	2a. M	2a. Mailing Address				4.	FEI Number		Applied For	
21			26	<u></u>					65-0424876	Not Applicable		
Suite, Apt. #, etc.				Suite, Apt. #, etc.				Τ_	Certificate of Status Desired	\$8.75	5 Additional	
22				27				5.	Certificate of Status Desired	Fee	Required	
City & State				City & State				6.	Election Campaign Financing	\$5.0	00 May Be	
23				28				Trust Fund Contribution Added to Fees				
Zip	Zip Country			Zip Country				8. This corporation owes the current year Intangible				
24	25 29				30			Personal Property Tax. Yes No				
- · L - · · · · · · · · · · · · · · · · 	9. Name	and Address of Curre	ed Agent	gent			10. Name and Address of New Registered Agent					
			-	-		81	Name					
DE SOSTOA, ROBERT J							Street Addr	Street Address (P.O. Box Number is Not Acceptable)				
5523 NORTHWEST 41ST AVENUE							Stiget Addi	C33 (1				
COC	ONUT CR	EEK FL 33073				83						
•	÷.					84	City		FI	_ 85 Zi	ip Code	
11. Pursuant	to the provis	ions of Sections 607.05	02 and 607.	1508. Florida Statu	ites, the a	bove	-named corp	oration	n submits this statement for the purpose of	f changing	its registered	
office or re	egistered ac	ient, or both, in the State	of Florida.	Such change was a	authorized	i by i	the corporation	on's bo	oard of directors. I hereby accept the appo	intment as	registered	
agent. I a	m familiar w	ith, and accept the oblig	ations of, Se	ection 607.0505, FR	onda Stat	utes.						
SIGNATURE		t	ant and title if an	nlienbio (NOT	E- Dagietered	Agent	t signature require	d when r	reinstating) DATE		———	
							t algitatoro requiro		ADDITIONS/CHANGES TO OFFICERS A	ND DIREC	TORS IN 12	
TITLE	D	OTTIOLITO A	DINEO!	☐ DELETE	1.1 TC	n.e.			ASSITION OF INTINGEO TO STATE OF THE	Chang		
	DE SOSTOA, ROBERT J			1.2 NAME								
NAME		RTHWEST 41ST AVE	NIE	1.3 STREET AD			ADDDECC		•			
STREET ADDRESS		JT CREEK FL 33073					Į.					
CITY-ST-ZIP	D	71 CREEK 1 E 00070		DELETE	2.1 TI	TY-ST	ZIP			Г T Chang	ge Addition	
TITLE	_	TOA MILACIDOS		Detere	4						,,	
NAME		FOA, MILAGROS	MILIE	•	2.2 N						Ī	
STREET ADDRESS					2.3 STREET ADDRESS						į	
CITY-ST-ZIP	CUCUNI	JT CREEK FL 33073		<u> </u>	_	TY-S	T-ZIP			∏ Chang	ge Addition	
TITLE	• `	· .	7	DELETE	3.1 TI		•			∏ cuanĝ	T VOCIDON	
NAME	•	4,			3.2 N	WE						
STREET ADDRESS					3.3 \$1	REET	ADDRESS					
CITY-ST-ZIP		<u> </u>			3.4. C	ITY-S	T-ZIP					
TITLE				☐ DELETE	4.1 TI	ΠE				Chang	ge 🗍 Addition	
NAME					4.2 N	AME				,		
STREET ADDRESS					4.3 S	REET	ADDRESS					
CITY-ST-ZIP		•			4.4 C	TY-ST	r-ZIP					
TITLE				☐ DELETE	5.1 TI					Chang	ge 🗌 Addition	
NAME	,				5.2 N	AME						
STREET ADDRESS					5.3 ST	REET	ADDRESS					
CITY-ST-ZIP					5.4 C	TY-ST	r-ZIP					
TITLE				☐ DELETÉ	6.1 TI	TLE				Chang	ge 🔲 Addition	
NAME		•			6.2 N	ME					į	

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 annual report of 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 of the receiver of 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 charged. On an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

CITY-ST-ZIP