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 #

128922

(2)

PALM BEACH WOODWORK CO INC

FILED
Mar 16 1998 8:00am
Secretary of State

I ALITI DI				<				
Principal Place	of Business	Mailing Address	,,,		\		J., 4.4., 4.4., 4.4.	
800 23RD ST RESERVENCE			976	X6				
WEST PALM BEACH FL 33407 WEST PALM BEACH FL			1407)	DO NOT WRITE IN THIS	S SDACE	
				,		3. Date Incorporated or Qualified) OF ACL	··
						04/21/1934		1
- 5: : 15:		De Mailine Address				4, FEI Number	1 145	plied For
2, Principal Pla	Ce of Business	2a. Mailing Address				59-0389690		plied For t Applicable
21		Suite, Apt. #, etc.					\$8.75 A	
						5. Certificate of Status Desired	Fee Re	
27						6 Fleeties Compaign Financing	\$5.00	<u> </u>
						6. Election Campaign Financing Trust Fund Contribution	Added t	
23 Zip	Country	Zip	Cour	ntrv		8. This corporation owes or has pald the c		
24	25 29 30			,		Personal Property Tax due June 30.] No
24	g. Name and Address of Curr	1 .1	30]			10. Name and Address of New Registered	d Agent	======
PIKE				81	Name			
	•]					
309 VIA LINDA				82 Street Address (P.O. Box Number is Not Acceptable)				
PALI	M BEACH FL 33480		1	83				
•								
				84	City	F	85 Zip (Code
	607.0	CO and CO7 1509 Florido Ptotuto	e the ab		named corps	viction submits this statement for the nurnose	of changing its	s registered
office or rec	nistered agent or both in the Sta	to of Florida. Such change was a	uthorized	ועמו	the corporation	on's board of directors. I hereby accept the ap	pointment as	registered
agent. I am	familiar with, and accept the obl	igations of, Section 607.0505, Flo	rida Statu	nes.				
SIGNATURE _						d when reinstaling) DATE		
	gnature, typed or printed name of registered a		Registered	Ageni	I signature required	d when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS AT	ID DIRECTOR	
12.	T-S	ND DIRECTORS DELETE	1.1 TiT	1 E			Change	Addition
TITLE	_			3		ecretary-treasurer	7	
NAME	AAAAA N AAAAA WAY					.C. PIKE		
STREET ADDRESS						8838 N. OSPREY WAY		
CITY-ST-ZIP	JUPITER FL	K FL 141		Y-ST-	ZIP J	UPITER FL 33458	Change	Addition
TITLE	AB P.D.	☐ DELETE	2.1 TITLE			RESIDENT	Change	
NAME	PIKE, CV	■		22 NAME C		HARLES V. PIKE 09 VIA LINDA		ŀ
STREET ADDRESS			2.3 STI	2.3 STREET ADDRESS		ALM BEACH, FL 33480		
CITY-S1-ZIP			2.40	2.4 U117-81-21F		ALM BEACH, FL 33400		
TITLE	PD DELETE 3.1		3.1 TIT	LE			Change	Addition
NAME	PIKE, P.O.	• •	3.2 NA	ME				
STREET ADDRESS			3.3 STI	REET A	DDRESS			
CITY-ST-ZIP	PALM BCH, FL 05000		3.4. CITY-		- ZIP			
TITLE	<u> </u>	DELETE	4.1 TIT	LE		-	Change	Addition
NAME	MIZE	•	4. 2 NA	AME				!
STREET ADDRESS	5775 FERNIEY-DR W- #13	6	4.3 STREE		DDRESS			1
CITY-ST-ZIP	WEST PALM BEREH FL		4.4 CITY-S					
TITLE		DELETE	5.1 TITLE		· 		Change	☐ Addition
NAME		- -	5.2 NAME		Ì			
					DORESS			- 1
STREET ADDRESS					i			
CITY-ST-ZIP		☐ DELETE	5.4 CIT		- ZIP		Change	Addition
TITLE			6.1 TIT				511011go	
NAME			6.2 NA					1
STREET ADDRESS					DORESS			
CITY-ST-ZIP			6.4 CI1			240 07/0/0		informetice
14 Lhereby ce	bailagus anitematica that the	with this filling does not qualify to	r the exe	moti	on stated in S	Section 119.07(3)(i), Florida Statutes, I further	Certify that the	IUOMBINON

4. 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 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 all address.

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