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

Mar	14	199	7	8:00an	n
Se	cre	tary	OÍ	f State	

FILED

	MEN # 176478 OODS, INC.	(6)							
Principal Plac	e of Business	Mailing Address				6 8 8 8 9			
1300 W INDUSTRIAL AVE BLDG A BAYS 105-107 BOYNTON BCH. FL 33426 US		2600 E HWY 146 P. O. B OX 68 LA GRANGE KY 40031-0068 US			Date Incorporated or Qualified 3a. Date of Last Report				
					12/12/1953	05/0)1/1996		
—	Place of Business	2a. Mailing Address			4. FEI Number			oplied For	
Suite, Apt	# ata	Suite, Apt #, etc.			59-0727958			ot Applicable	-
22	#, U .	27			5. Certificate of Status Desired		აბ./ 5 / Fee Re	Additional equired	
City & Stat	le .	City & State		·	6. Election Campaign Financing			May Be	1
23		28			Trust Fund Contribution		Added t		
Zip 24	Country 25	Z(p)	Count 30	lry		Yes [] No	. 199.032,	
	9. Name and Address of Current	Registered Agent	8		10. Name and Address of New R	egistered A	igent		1
	ITWIG, RONALD W		ľ	Name					
1300 IND. AVE.			8	Street Ad	et Address (P.O. Box Number is Not Acceptable)				
	G. A BAYS 105-107 'NTON BEACH FL 33426		8	···					1
BUI	NION BEACH FL 33420]
			8	City		FL	85 Zip (Code	
11. Pursuant office or ragent. La	to the provisions of Sections 607.0502 registered agent, or both, in the State of im familiar with, and accept the obliga	and 607.1508, Florida Statut of Florida, Such change was a tions of, Section 607.0505, Flo	es, the abo authorized orida Statut	ove-named co by the corpor tes.	orporation submits this statement for the ration's board of directors. I hereby account	purpose of pt the appr	changing it pintment as	s registered registered	
SIGNATURE	Signature, typed or printed home of regularied agen	2005)	C. Brandon Santa		ouired when reinstating)	DATE			
12.	OFFICERS AND		13.	sport signature rec	ADDITIONS/CHANGES TO OFFI		DIRECTOR	RS IN 12	စ်
TITLE	VD	DELETE	1.1 1011.1				Change	Addition	CR2E034 (9/96)
NAME	GUDMUNDSSON, JON S. (JR)		12 NAM	E					12
STREET ADDRESS	10518 BUCKEYE TRACE		1.3 S1RE	EL ADDRESS					
CITY-ST-ZIP	GOSHEN KY		1.4 CfTY	- S1 - Z(P			 -		
TITLE	PD	DELETE	213111	·			Change	Addition	O
NAME	NENTWIG, RONALD		2.2 NAM	Į.					
STREET ADDRESS	7601 S.W. 144TH TERR.		1	ET ADDRESS					
CHY-ST-ZIP TITLE	MIAMI FL STD	DELETE	2. 4 CHY 3.1 THE	7-51-2IF			Change	Addition	1
NAME	GIRARDI, TIMOTHY	€ 14CST 1C	3.1 IIIII				onlings	reconjoit	}
STREET ADDRESS	8010 SHADOW CREEK RD		1	ET ADDRESS					
CITY-ST-ZIP	CRESTWOOD KY			7-S1-7IP					
TITLE	D	☐ DELETE	41 1111				Change	Addition	1
NAME	GUDMUNDSSON, ORN		4. 2 NAN	A:					
STREET ADDRESS	114 TRIBAL RD		4.3 STHE	EL ADORESS					
CITY-ST-ZIP	LOUISVILLE KY		4.4 CITY	- S1 - ZIP					
TITLE		☐ DELETE	5 1 1 II LI	ŧ [Change	Addition	
NAME			5.2 NAM						
STREET ADDRESS				TET ADDRESS					
CITY-ST-ZIP		DELETE		- \$1- ZOP			Change	Addition	-
TITLE		L_I DELCIC	G.1 TITUE	1			Change	∟ мошол	1
NAME Street Address			6.2 NAM 6.3 STRE	ET ADDRESS					
CITY-ST-ZIP			6.4 C/TY						
	by cartify that the information cumulad	with this filest does not sugh			ed in Section 110 07/3Vi). Upride Statut	on Liberthor	conify that	tho	1

not nevery decrease information supplied with this image does not quality for the exemption stated in Section 119 07(3)(i). Florida Statulos. 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 charging, or on an attachment with an address.

7-25-97

6.9.227 - IUV i