

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

**FILED**  
**May 12 1997 8:00am**  
**Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1997**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # 398408 (5)**  
 Corporation Name  
**IDEAL LUMBER & HARDWARE, INC.**



Principal Place of Business  
**1875 EAST 4TH AVE HIALEAH FL 33010 US**

Mailing Address  
**1875 EAST 4TH AVENUE HIALEAH FL 33010-3123 US**

3. Date Incorporated or Qualified **03/30/1972** 3a. Date of Last Report **05/01/1996**

4. FEI Number **59-1390889** Applied For Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

23. Zip Country

24. 25. 26a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip Country

29. 30.

9. Name and Address of Current Registered Agent  
**ARANGO, ROBERTO**  
**752 E. 32ND ST.**  
**HIALEAH FL 33013**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City **FL** 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS

TITLE  DELETE

NAME **P CRESPO, LUIS**

STREET ADDRESS **13521 SW 8TH STREET**

CITY - ST - ZIP **MIAMI FL**

TITLE  DELETE

NAME **S ARANGO, MARIA D.**

STREET ADDRESS **752 E. 32ND STREET**

CITY - ST - ZIP **HIALEAH FL**

TITLE  DELETE

NAME **VPT ARANGO, MANUEL**

STREET ADDRESS **752 E. 32ND ST**

CITY - ST - ZIP **HIALEAH FL**

TITLE  DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE  DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  Change  Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE  Change  Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE  Change  Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE  Change  Addition

4.2 NAME **VPD**

4.3 STREET ADDRESS **ROBERTO ARANGO**

4.4 CITY - ST - ZIP **752 E. 32nd ST, Hialeah, FL 33013**

5.1 TITLE  Change  Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE  Change  Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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.

SIGNATURE \_\_\_\_\_ **04/30/97** **305/888-0188**

CR2E034 (9/96)