## 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 # 398408**

IDEAL L	UMBER & HARDWARE, INC	<b>).</b>			
Principal Place of Business Mailing Address				1 (40/06 JULIO 1910) JEIN GIGIN GOND (AN ANGER SISI) GIGIN GIGIN SIGN	
1875 EAST 4TH AVE 1875 EAST 4TH AVENUE					
HIALEAH FL 33010 HIALEAH FL 33010 US US					DO NOT WRITE IN THIS SPACE
00		00			3. Date Incorporated or Qualifed
					03/30/1972
Principal Place of Business     2a. Mailing Address					4, FEI Number Applied For
21		26			<b>59-1390889</b> Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<b>-</b>		5 Certificate of Status Desired   \$8.75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & Star	te	City & State			6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 30	Country		8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No
	9. Name and Address of Curren		<u> </u>		10. Name and Address of New Registered Agent
		<u> </u>	81	Name	
ARANGO, ROBERTO 752 E. 32ND ST. HIALEAH FL 33013			82	Street Add	ress (P.O. Box Number is Not Acceptable)
			Sireer Add		
			83		·
			84	City	85 Zip Code
		<u> </u>	Ļ_	L	poration submits this statement for the purpose of changing its registered
office or I	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was auth ations of, Section 607.0505, Florida	orized by a Statutes	the corporation.	on's board of directors. I hereby accept the appointment as registered
12.			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	CRESPO, LUIS	9	1.2 NAME		•
STREET ADDRESS	13521 SW 6TH STREET		1.3 STREE	T ADDRESS	•
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP		
TITLE	S	☐ DELETÉ	2.1 TITLE		Change Addition
NAME	ARANGO, MARIA D.		2.2 NAME		
STREET ADDRESS			2.3 STREE	ADDRESS	
CITY-ST-ZIP	HIALEAH FL	C prierr	2.4 CITY-ST-ZIP		. ☐ Change ☐ Addition
TITLE	ADANICO MANUEL	☐ DEL€TE	3.1 TITLE		☐ Change ☐ Addition
NAME	ARANGO, MANUEL 752 E. 32ND ST		3.2 NAME	TARDRECE	
STREET ADDRESS	HIALEAH FL		ľ	TADDRESS	
CITY-ST-ZIP TITLE	VPD	☐ DELETE	3.4. CITY-5 4.1 TITLE	11-217	☐ Change ☐ Addition
NAME	ARANGO, ROBERTO	<u> </u>	4.2 NAME	}	
STREET ADDRESS	JEG E GOND OT			T ADDRESS	
CITY-ST-ZIP	HIALEAH FL		4.4 CITY-S	1	
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	ALAIN CRESPO		5.2 NAME		
STREET ADDRESS	ADTAL OUL ATTLE OT		5.3 STREE	TADDRESS	
CITY-ST-ZIP	MIAMI FL		5.4 CITY-S	T-ZIP	

14. 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 an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

305-8880188

**FILED** 

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90151 038 \*\*\*150.00