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

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

(8)

DOCUMENT # 555604

1. Corporation Name
WEST GATE CABINET & MILLWORK, INC

Feb 23 1998 8:00am Secretary of State

**FILED** 

WLO!	GATE CADINET &	WILLESTOTIK, 1110.					
Principal Plac	ce of Business	Mailing A	Mailing Address			. tanifi Bilbi Bilai dirib billi balli bibi bi	Sit Giate gidti biālt diāte tiret ien.
862 W. 13TH		862 W. 1	862 W. 13TH CT.				
RIVIERA BEA	ACH FL 33404	RIVIERA	RIVIERA BEACH FL 33404			DO NOT WRITE IN	THIS SPACE
						3. Date Incorporated or Qualified 12/19/1977	
2. Principal P	Place of Business	2a, Mailing	Address			4. FEI Number	Applied For
21		<b>├</b> ─	26			59-1786478	Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.			_	60 7E
22		27	27			5. Certificate of Status Desired	Fee Required
City & Stat	te	City &	City & State			6. Election Campaign Financing	\$5.00 May Be
23	·	28	<del></del>			Trust Fund Contribution	
Zip	Country	Zip	— · — —			8. This corporation owes or has paid to	
24	25	29	3	0		Personal Property Tax due June 30.	
	<del></del>	of Current Registered A	gent		N	10. Name and Address of New Regis	tered Agent
	DDOWS. EDWIN J.			81	Name		
862 W. 13TH COURT RIVIERA BEACH FL 33404				82	Street Add	dress (P.O. Box Number is Not Acceptable)	
		•		83			
				84	City		FL 85 Zip Code
44 Pureuant	to the provisions of Section	ne 607 0502 and 607 1509	Florida Statutas	the above	named cor	poration submits this statement for the num	<del> </del>
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							
SIGNATURE	Signature, typed or printed name of	registered agent and little if applicat	ile. (NOTE P	tegistered Age	nl signature requ	aired when reinstating)	DATE
12.	OFF	ICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICER	
TITLE	P		DELETE	1.1 TITLE	ļ		Change Addition
NAME	WIDDOWS, JAY R	1111		1.2 NAME			
STREET ADDRESS	3267 GONDOLIER V	YAT		1.3 STREET	address		
CITY-ST-ZIP	LANTANA FL		The state of the s	1.4 CITY-S	T-ZIP		
TITLE	ST WIDDOWS FOUND	1	DELETE	21 TITLE			Change Addition
NAME	WIDDOWS, EDWIN 3267 DIAMOND HEA			2.2 NAME			
STREET ADDRESS		עח עא		2.3 STREET	ſ		
CITY-ST-ZIP	LANTANA FL		T on ore	2.4 CITY-S	T - ZIP		Ohanna Addition
TITLE			☐ DELETE	3.1 TITLE			☐ Change ☐ Addition
NAME				3.2 NAME	100000		
STREET ADDRESS				3.3 STREET			
CITY-ST-ZIP			DELETE	3.4. CITY - S	T-ZIP		Change Addition
TITLE			المال المال	4.1 TITLE			
NAME OZDECY ADDRESO				4. 2 NAME	4DODECC		
STREET ADDRESS				4.3 STREET			
CITY-\$1-ZIP TITLE			DELETE	4.4 CITY - ST 5.1 TITLE	I - ZIP		Change Addition
			- Descrip	5.2 NAME	1		Crango radition
NAME OTDEET ANDRESS				5.3 STREET	ADDRESS		
STREET ADDRESS				5.4 CITY-S			
CITY-ST-ZIP TITLE			DELETÉ	6.1 TITLE	- AF		Change Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET	ADDRESS		
CITY-ST-ZIP	and that the information of	augotical with this films do		6.4 CITY-ST		Continue 110 07/9/// Elorido Statutos 1 fuet	has partite that the information

I nereby 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 informatio 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.