FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$5 50.00 Feb 04 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mori ANNUAL REPORT Secretary of St Secretary of State DIVISION OF CORPO KATIONS 1998 DOCUMENT # (4) 614144 FERNANDEZ CABINETS, INC. Principal Place of Business Mailing Address 257 WEST 23 STREET 257 WEST 23 STREET HIALEAH FL 33010 HIALEAH FL 33010 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/22/1979 2a, Mailing Address 2. Principal Place of Business 4 FEI Number Applied For 59-2092194 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country Zip Zip 8. This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FERNANDEZ, JOSE 257 WEST 23 STREET 82 Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33010 84 City Zip Code 85 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 □ DELETE 1.1 TITLE Change TITLE FERNANDEZ, JOSE 1.2 NAME NAME 3805 SW 149TH TER 1.3 STREET ADDRESS STREET ADDRESS MIRAMAR FL CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE FERNANDEZ, SONIA NAME 22 NAME 3805 SW 149TH TER STREET ADDRESS 2.3 STREET ADDRESS MIRAMAR FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP VPD DELETE VPD ☐ Change Addition TITLE 3.1 TITLE HOYOS, JORGE A. HOYOS, JORGE A. NAME 32 NAME 2369 SW 15 ST, APT REAR 88 N.E. 88 STREET STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL EL PORTAL, FL CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change ☐ Addition TITLE 41TITLE SARMIENTO, ADA E. NAME 4. 2 NAME **10033 NW 129TH TERRACE** STREET ADDRESS 4.3 STREET ADDRESS HIALEAH GARDENS FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE Change NAME 5.2 NAME

14. I hereby certify that the information supplied with this filing does not grafify 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 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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

Addition

5.4 CITY - ST - ZIP

61 TITLE

6.2 NAME

DELETE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME