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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997 DOCUMENT # G06329

LUMBER WORLD OF THE PALM BEACHES, INC.

ncipal Place of Business	Mailing Address
IS HENRY AVE.	3615 HENRY AVE.
ET PALM BEACH FL 33405-7217	West Palm Beach FL 33405-2205

FILED Jul 17 1997 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address			4 ERRIEKU BONI DONIO DIYOD IYAND UIDIR KOKI DIDIR AYDIR DIYON OKRAL BIDIN DIBAL KOKI DIDIR
9815 HENRY A WEST PALM B	IVE. EACH FL 33405-7217	3615 HENRY AVE. WEST PALM BEACH FL	33405-2205		
					3. Date Incorporated or Qualified 3a. Date of Last Report 02/13/1996
··········	lace of Business	2a. Mailing Address			4. FEI Number Applied For
Suite, Apt.	# atc	Suite, Apt, #, etc.			59-2226748 Not Applicable \$8.75 Additional
22	#, Q (U.	27			5. Certificate of Status Desired Fee Required
City & State	6	City & State			B. Election Campaign Financing Trust Fund Contribution Added to Fees
Zip	Country	Ζφ	Count	ry	8. This corporation has liability for intangible tax under s. 199.032,
24	25	29	30		Florida Statutes Yes No
	9. Name and Address of Curre	nt Registered Agent		aT	10. Name and Address of New Registered Agent
	LETT, THOMAS		. 8	1 Name	
3615 HENRY AVE. WEST PALM BEACH FL 33405		8	2 Street	Address (P.O. Box Number is Not Acceptable)	
****	or their percent a cours		8	3	
			8	4 City	85 Zip Code
			. [,	FL
11. Pursuant office or rapent i a	to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with, and accept the oblig	02 and 607.1508, Florida Statu e of Florida. Such change was lations of, Section 607.0505, F	ites, the abo authorized lorida Statut	ve-named by the cor es.	d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typod or printed name of registered ap	ent and little if applicable (NO	TF: Registered A	oent signature	e required when renstating) DATÉ
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP	DELETE	1.1 T/TLE		DP Change Addition
NAME	HAYLETT, THOMAS		1.2 NAM	É	Haylett, Thomas
STREET ADDRESS	14369 66TH TRAIL NORTH		1.3 STRE	ET ADDRESS	Haylett, Thomas 10604 Chapman Oak Ct. Palm Beach Gardens, F1, 33418 ST Change Addition Haylett, Karen Sue 10604 Chapman Oak Ct. Palm Beach Gardens, F1, 33418
CITY-ST-ZIP	PALM BCH GARDENS FL	T occess	1.4 CITY		Palm Beach Gardens F1, 33418
TITLE	ST MANIETT MADEN SHE	☐ DELETÉ	2.1 11111		ST Change Addition
NAME	HAYLETT, KAREN SUE 14369-66TH TRAIL,N.		2.2 NAM		Haylett I the ana a Oak Ct.
STREET ADDRESS	PALM BCH GARDENS FL		2.3 STRE	ET ADDRESS	Dal Beach Gardens El 22418
CITY-ST-ZIP TITLE	17441 0011 0410 1010	DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAM		
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP			3.4. CITY	-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	15		4. 2 NAN	E	
STREET ADDRESS			4.3 STRE	et adoress	
CITY-ST-ZIP			4.4 CITY		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAM		
STREET ADDRESS				et address	
CITY-ST-ZIP		☐ DELETE	5.4 CITY		Change Addition
TITLE		m nertig	6.1 TiTLE		C onside Nation
NAME CTOCCT LINDSECS	1		6.2 NAM		
STREET ADDRESS	1.2. Fr.			ET ADDRESS	
CITY-ST-ZIP			6.4 CITY	S1-71P	

I do hereby certify that the information supplied information indicated on this annual report of I am an officer or director of the corporation appears in Block 12 or Block 13 if charges, or qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. I further certify that the t is true and accurate and that my signature shall have the same legal effect as if made under oath; that inpowered to execute this report as required by Chapter 607, Florida Statutes; and that my name