2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED ANNUAL REPORT Apr 22, 2004 08:00 AM DOCUMENT # G49263 **Secretary of State** 1. Entity Name A & F CUSTOM WOODWORK, INC. Principal Place of Business Mailing Address 6907 N.E. 3RD AVENUE 6907 N.E. 3RD AVENUE MIAMI, FL 33138-5511 MIAMI, FL 33138-5511 01292004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2309956 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ANTONOIS, RICHARD DO NOT WRITE 6907 N.E.AVE MIAMI, FL 33138 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE, Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE ANTONOIS, RICHARD NAME U00000124829 04/22/04-80060-010 150.00 STREET ADDRESS 6907 N.E. 3 AVE MIAMI, FL 33138 CITY-ST-ZIP TETLE NAME FARAJALLAH, SALEH STREET ADDRESS. **6101 SW 15TH STREET** CITY-ST-ZIP MIAMI, FL TIBLE MAME STREET ADDRESS DO NOT WRITE CITY - 57 - ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP 33D F NAME STREET ADDRESS CITY-ST-ZIP

12. It 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SQUATURE AND THED OR PRINTED HAME OF SIGNING OFFICER O

THE NAME STREET ADDRESS CITY-SI-ZIP

4/19/04

- Daytime Phone #