

FILED
Apr 11 1997 8:00am
Secretary of State

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| <div>PROFIT CORPORATION ANNUAL REPORT 1997</div> <div>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</div> | | <div>Apr 11 1997 8:00am</div> <div>Secretary of State</div> | |
| <div>DOCUMENT # H64829 (5)</div> <div>1. Corporation Name CUSTOM FIBERGLASS WORKS, INC.</div> | | <div>Principal Place of Business 2080 D TIGERTAIL BLVD. DANIA FL 33004</div> <div>Mailing Address 2080 D TIGERTAIL BLVD. DANIA FL 33004-2108</div> | |
| <div>2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24</div> | | <div>2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29</div> | |
| <div>3. Date Incorporated or Qualified 07/02/1985</div> <div>3a. Date of Last Report 02/02/1996</div> | | <div>4. FEI Number 59-2550094</div> <div>Applied For Not Applicable</div> | |
| <div>5. Certificate of Status Desired \$8.75 Additional Fee Required</div> | | <div>6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees</div> | |
| <div>7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No</div> | | <div>8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent</div> | |
| <div>10. Name and Address of Current Registered Agent 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.</div> | | <div>12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</div> | |
| <div>12. OFFICERS AND DIRECTORS 1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY-STATE-ZIP 5. TITLE 6. NAME 7. STREET ADDRESS 8. CITY-STATE-ZIP 9. TITLE 10. NAME 11. STREET ADDRESS 12. CITY-STATE-ZIP 13. TITLE 14. NAME 15. STREET ADDRESS 16. CITY-STATE-ZIP 17. TITLE 18. NAME 19. STREET ADDRESS 20. CITY-STATE-ZIP</div> | | <div>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY-STATE-ZIP 5. TITLE 6. NAME 7. STREET ADDRESS 8. CITY-STATE-ZIP 9. TITLE 10. NAME 11. STREET ADDRESS 12. CITY-STATE-ZIP 13. TITLE 14. NAME 15. STREET ADDRESS 16. CITY-STATE-ZIP 17. TITLE 18. NAME 19. STREET ADDRESS 20. CITY-STATE-ZIP</div> | |
| <div>14. I do 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 included 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.</div> | | <div>SIGNATURE: [Signature] 4-9-97 954 920 9737</div> | |