

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J86716 (4)

1. Corporation Name

SOUTH FLORIDA FINISH AND TRIM, INC.



Principal Place of Business

**12994 SW 132 AVENUE
MIAMI FL 33186
US**

Mailing Address

**12994 SW 132 AVENUE
MIAMI FL 33186
US**

2. Principal Place of Business

21 Suite, Apt., etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt., etc.

27 City & State

28 Zip

Country

g. Name and Address of Current Registered Agent

**PILKINGTON, JEFFREY J.
34650 SW 212 AVENUE
MIAMI FL 33034**

3. Date Incorporated or Qualified

08/11/1987

3a. Date of Last Report

03/31/1995

4. FEI Number

59-2835256

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Numbers Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0501 and 607.1601, 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 607.1601, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Director (Print Name and Title)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	☐ DELETE
NAME	PILKINGTON, JEFFREY J.	
STREET ADDRESS	12994 SW 212 AVENUE	
CITY-ST-ZIP	MIAMI FL	
TITLE	VP	☐ DELETE
NAME	SKILLITER, SHARON M.	
STREET ADDRESS	12994 SW 132 AVENUE	
CITY-ST-ZIP	MIAMI FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13.

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-ST-ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-ST-ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-ST-ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-ST-ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-ST-ZIP	

14. I do hereby certify that the information supplied in this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information 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 amendment with an addendum.

SIGNATURE: JEFFREY J. PILKINGTON
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

32596 705256694
DATE OF FILING

CR2E034 (12/95)