

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**APPROVED
AND
FILED**

95 JUL 21 PM 4:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100001545431
-07/25/95--01068--010
****225.00 ****225.00

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Nanette B. Mortimer
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K18645

(7)

1. Corporation Name

VELCAR CARPENTER, INC.

Principal Place of Business

Mailing Address

% WILSON VELASCO
8161 NW 60TH ST
MIAMI FL 33166

% WILSON VELASCO
8161 NW 60TH ST
MIAMI FL 33166

(DO NOT WRITE IN THIS SPACE)

3. Date incorporated or qualified

3a. Date of Last Report

03/18/1988

06/01/1994

4. FEI Number

Applicant For

65-0037031

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. ☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for example tax under s. 191.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21. State Apt. # etc.

26. State Apt. # etc.

22. City & State

27. City & State

23. City & State

28. City & State

24. City & State

29. City & State

25. City & State

30. City & State

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VELASCO, WILSON
8161 NW 60TH ST
MIAMI FL 33166

81. Name

82. Street Address - P.O. Box Number is Not Acceptable

83. City

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0805 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 607.0905, Florida Statutes.

SIGNATURE

(Signature must be written on this line and the other pages also)

(If the corporation is a partnership, the signature must be of a partner)

(Date)

12. OFFICERS AND DIRECTORS

13.

NAME

PD
VELASCO, WILSON
417 E 19TH ST
HIALEAH FL

NAME

SD
CARDONA, GLORIA E.
417 E 19TH ST
HIALEAH FL

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SIGNATURE:

Gloria E. Cardona

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/14/95 477/537