FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K37340

(2)

EURO-AMERICAN CABINETS, INC. (E.A.C.I.)

.C.I.)

FILED
Apr 24 1998 8:00am
Secretary of State



Principal Place of Business Mailing Address						A 31811 BYAN BURN BY		
					1 10419111 853 11111 1856 11111 616(1 6611 611	1) 919)(B(8)) \$18) \$1	BLI DIVIL MEL	
C/O MANUEL REYES C/O MANUEL REYES								
468 N.E. 59 STREET FT. LAUDERDALE FL 33334		488 N.E. 59 STREET	004		DO NOT WRITE IN THIS SPACE			
FI. DAUDERD	ALE FL 33334	FT. LAUDERDALE FL 33	334		3. Date Incorporated or Qualified	INIS SPACE		٦
					10/07/1988			
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	1/	Applied For	1
21		26			65-0079115	 	Not Applicable	1
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75	Additional	1
22		27			5. Certificate of Status Desired	Fee f	Required	
City & State		City & State	·		6. Election Campaign Financing		О Мау Ве	
23		28			Trust Fund Contribution	Added to Fees		
Zip	Country		Zip Country		8. This corporation owes or has paid the current year Intangible			
25 25 25 Name and Address of Curre		29 30 30		Personal Property Tax due Jur 10. Name and Address of New F				-
DC	YES, MANUEL	on noglatored Agent		81 Name	IV. Hallie Bild Addless Of Herr Hegist	ered Agent		1
	N.E. 59 STREET							
	LAUDERDALE FL 33334		ļ	82 Street Ad	dress (P.O. Box Number is Not Acceptable)			
• • •	CADOCHOALE I E 30307		}	83				┨
			ļ					╛
				84 City		FL 85 Zip	o Code	1
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statu	tes, the ab	ove-named co	rporation submits this statement for the purp ation's board of directors. I hereby accept the		its registered	ł
office or s	registered agent, or both, in the Sta I m famil iar with land accept the obl	te of Florida. Such change was realions of Section 607 0505. Fl	authorized Iorida Stati	by the corpor	ation's board of directors. I hereby accept th	e appointment a	s registered	
SIGNATURE		ganons en, or onan our loogs, in	ionida otati	160.				
SIGNATURE	Signature, typed or printed name of registered a	gent and title diapplicable (NO	II Registered	Agont signature rec	joired when reinstating)	PATE		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICER			100
TITLE .	DPS	☐ DELETE	1.1 TIT	LE		L Change	Addition	Įξ
NAME	REYES, MANUEL		1.2 NA	ME				F024
STREET ADDRESS	488 N.E. 59 ST. FT. LAUDERDALE FL			REET ADDRESS				Įپِّ
CITY-ST-ZIP TITLE	VP	DELETE		Y-ST-ZIP		Obassa	T Addition	ă
NAME	RE YES, JULIA	ב טרננונ	2.1 117	- 1		Change	Addition	١
STREET ADDRESS	488 N.E. 59TH ST.		2.2 NA	ļ				
	FT. LAUDERDALE FL			REET ADDRESS				
CITY-ST-ZIP	T. Brookingter	DELETE .	2 4 UI	Y-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition	1
NAME			3.2 NA			□ Onlingo	Padilion	1
STREET ADDRESS				EFT ADDRESS				
CITY-ST-ZIP			•	Y-ST-ZIP			ł	1
TITLE		☐ DELETE	4.1 111			Change	Addition	
NAME			4. 2 NA	ME				ĺ
STREET ADDRESS			4.3 STF	EET ADDRESS				
CITY-ST-ZIP			4.4 CIT	Y-S1-ZIP				
TITLE		DELETE	5.1 TITO			Change	Addition	
NAME			5.2 NAI	ME			i.	Š
STREET ADDRESS			5.3 STR	EET ADDRESS			刘 :甘	í
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP			·	
TITLE		☐ DELETE	6 1 THT	E		Change	A	
NAME			6.2 NA	AE				
STREET ADDRESS			6.3 STR	TET ADDRESS				
CITY-ST-ZIP			6.4 CrT	r-St-ZIP				

14. Thereby 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 annual report or supplemental arrived report is true and accurate and that my signature shall have the same logal effect as if made under oath, that I an officer or director of the corporation or the receiver or trustee empowered id execute this report as required by Chapter 607, Florida Statutes; and that my name appears Block 12 or Block 13 if changed 0, on an extensional statutes.

CICNIATURE.

Maniel Roya

May de 4