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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # K82831

(4)

orporation Name

C. B. WOODWORK CORPORATION

Principal Place of						181 BYNT BEBEL BIBLI BIBLE B	
- micipai riace di	Business	Mailing Address			***************************************		8 II WIEN WIWH ISS
% CARLOS A. BANDERA 14674 N.W. 26 AVENUE MIAMI FL		14674 N.W. 26 AV	% CARLOS A. BANDERA 14674 N.W. 26 AVENUE MIAMI FL				
mirwii (L		MICHAI CE			3. Date Incorporated or Qualified 04/21/1989	3a. Date of Last P 04/14/1	eport 995
2. Principal Place of Business		2a. Mailing Address 26			4. FEI Number 59-2415198		Applied For Not Applicable
Suite, Apt. #, 6	etc.	Suite, Apt. #, etc. 27			5. Certificate of Status Desired	1 4	Additional Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution	1 1	0 May Be d to Fees
Zφ	Country	Ζιρ	Count	У	8. This corporation has liability for in		199.032,
24	25	29	30		Florida Statutes Ves		
	g. Name and Address of Currer	nt Hegistered Agent	В	Name	10. Name and Address of New R	egistered Agent	
PANDED	A CADING A			INAITIE			
Bandera, Carlos A. 14674 N.W. 26 Avenue					ddress (P.O. Box Number is Not Acceptable)		
miami fi	-		8	3			
			8	4 City		FL 85 Zi	p Code
familiar with, a	and accept the obligations of, Sect	tion 607.0505, Florida Statute	es.	poration's boa	ard of directors. I hereby accept the appo	mitriont as registered	ragent ram
SIGNATURE	nature, typed or printed name of registered agent	Land title it applicable	NOTE: Registered Ac	ent signature require	ed when reinstatinal	DATE	
the second second	nature, typed or printed name of registered agent OFFICERS AN	I and title if a oplicable (I	NOTE: Registered Ag	ent signature require			DRS IN 12
SIGNATURESgr 12.	OFFICERS AN		NOTE: Registered Ag		od when reinstativy) ADDITIONS/CHANGES TO OFFI		DRS IN 12
S.gr 12.	D D BANDERA, MARIA A.	D DIRECTORS	13.			ICERS AND DIRECTO	
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12. TILLE	OFFICERS AN D BANDERA, MARIA A. 14674 N.W. 26 AVENUE OPALOCKA FL	D DIRECTORS	13. 1 1 TRU 1.2 NAMI	ET ADDRESS		ICERS AND DIRECTO	
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/13/96 (305) 685-3866 Daytime Phone 1