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 #

1. Corporation Name

TITLE

NAME STREET ADDRESS

TITLE NAME

CITY-ST-ZIP

STREET ADDRESS

(6)

WOOI	DCRAFT FIXTURES, INC.					
Principal Place	e of Business	Mailing Address				OLDIT GEBIT BIBIS BIBE BIBE SOBE
% GEORGE MORAITIS 1029 E 28 ST HIALEAH FL 33013 US		16919 1601 7 NW 57TH AVE MIAMI FL 33055 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/26/1989		
2. Principal P	lace of Business	2a. Mailing Address			12/20/1909 4. FEI Number	Applied For
21		26		65-0161384	Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5, Certificate of Status Desired	\$8.75 Additional	
		27	· · · · · · · · · · · · · · · · · · ·		5, Certificate of Status Desired	Fee Required
City & State	9	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation owes or has paid the c	- ' - ' '
24	25	29	30		Personal Property Tax due June 30.	∐ Yes ∐ No
	9. Name and Address of Curren	Registered Agent		81 Name	10. Name and Address of New Registered	d Agent
MORAITIS, GEORGE 18919 NW 57 AUP MIAMI FL 33055				82 Street A	ddress (P.O. Box Number is Not Acceptable)	
				83		
				84 City	F	85 Zip Code
agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State in (amiliar with, and accept the obligation)	2 and 607.1508, Florida Statu of Florida. Such change was tions of, Section 607.0505, Fl	tes, the ab authorized lorida State	ove-named c by the corpo ites.	orporation submits this statement for the purpose oration's board of directors. I hereby accept the ap	of changing its registered oppointment as registered
SIGNATURE	Signature, typed or printed name of registered ager	and title if applicable (NO	TE: Registored	Agent signature re	equired when reinstating) DATE	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12
TITLE	P	DELETE	1.1] [[LE		☐ Change ☐ Addition
NAME	HOLMES, LORAN		1.2 NA	ME		
STREET ADDRESS	5300 W. 14TH LANE		1.3 STI	REET ADDRESS		
CITY-ST-ZIP	HIALEAH FL		1.4 CIT	Y-S1-ZIP		
TITLE	8	☐ DELETE		LE		Change Addition
NAME	HOLMES, GRACE		22 NA	ME		
STREET ADDRESS	5300 W. 14TH LANE		2.3 ST	IEET ADDRESS		
CITY-ST-ZIP	-HIALEAH FL	I - [Y-S1-ZIP		
TITLE	VP	☐ DELETE	3.1 TiT			Change
NAME	HOLMES, RANDY		3.2 NA			
STREET ADDRESS	17701 S.W. 68TH AVE.			REET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL			Y-ST-ZIP		Change Addition
TITLE		ן טבננונ	4.1 TIT			L. J Orlange L. Addition
NAME			4, 2 NA			
STREET ADDRESS				EE1 ADDRESS		ļ
CITY-ST-ZIP		DELETE	4.4 CH 5.1 T(T	Y-ST-ZIP		Change Addition
			■ V.1 III			311011 C

CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I 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 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 attachment with an address.

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS 5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

Addition

FILED

Jan 28 1998 8:00am

Secretary of State