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

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name

DOCUMENT # L39389

WOODCRAFT FIXTURES, INC.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 09, 1999 8:00 am Secretary of State

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Mailing Address Principal Place of Business % GEORGE MORAITIS 16919 16917 NW 57TH AVE 1029 E 28 ST DO NOT WRITE IN THIS SPACE MIAMI FL 33055 HIALEAH FL 33013 3. Date Incorporated or Qualifed 12/26/1989 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 65-0161384 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 City & State \$5.00 May Be 6. Election Campaign Financing City & State Trust Fund Contribution Added to Fees 28 23 Zip Country 8. This corporation owes the current year Intangible Zip Country □No 💢 Yes Personal Property Tax. 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 MORAITIS, GEORGE Street Address (P.O. Box Number is Not Acceptable) 82 17919 NW 57TH AVE MIAMI FL 33055 83 85 Zip Code 84 City 11. Pursuant to the provisions of Sections 607.0502 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 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1.1 TITLE TITLE HOLMES, LORAN 1.2 NAME NAME 5300 W. 14TH LANE 13 STREET ADDRESS STREET ADDRESS HIALEAH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ DELETE 2.1 TITLE TITLE HOLMES, GRACE 2.2 NAME NAME 5300 W. 14TH LANE 2.3 STREET ADDRESS STREET ADDRESS HIALEAH FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE VΡ HOLMES, RANDY 32 NAME NAME 17701 S.W. 68TH AVE. 3.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 34 CITY-ST-ZIP CITY-ST-ZIP Addition [7] Change ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS

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 supplies with all single obes not quality for the exemption stated in Section 1.19.07(5)(f), I foliated statutes. I family controlled 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 changes, on an attachment with an address, with all other like empowered.

4.4 ÇITY-ST-ZIP

5 3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE 52 NAME

6.1 TITLE

6.2 NAME

DELETE

☐ DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

TITLE

NAME

Change

Change

☐ Addition

☐ Addition