2002 UNIFORM BUSINESS REPORT (UBR)

L53208 **DOCUMENT #**

1. Entity Name

3400 NW 25TH AVE

Principal Place of Business

POMPANO BEACH FL 33069

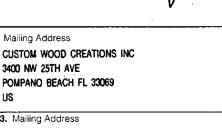
CUSTOM WOOD CREATIONS INC

CUSTOM WOOD CREATIONS, INC.



FILED Jul 24, 2002 8:00 am Secretary of State

07-24-2002 90134 009 ***150.00





us		U\$									
2. Principal Place of Business		3. Mailing Address)	1851 81911 81	Alt kiałi biait i	JEBEL DEBELL		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State			City & State			4. F	654)1/4/64			Applied For Not Applicable	
Zip .	Zip Country		Zip Coun		try ,	5. Certificate of Status Desired		\$8.75 Additional Fee Required			
	6. Name	and Address of Current	Registered Agent			7. N	ame and Address of New Ro	egistered	Agent	2010 - A. E.	
PETERS, DEBRA 3400 NW 25TH AVE						Name Street Address (P.O. Box Number is Not Acceptable)					
POMPANO E		33069	,								
	_,,,,,,			•	City		(FL	Zip Co	de	
8. The above n	amed entity	submits this statement fo	r the purpose of changing its	s register	ed office or reg	istered age	ent, or both, in the State of Flo	rida.			
SIGNATURE	ignature, typed	or printed name of registered agent	and title if applicable. (NO	TE: Registere	d Agent signature re	auired when rei	instating)	DATE			
	quirement a	ble to satisfy its Intangible and elects to do so.	FILE NOW After, May 1, 20 Make Check Paya	02 Fee	will be \$550.	00	10. Election Campaign Fin Trust Fund Contribution			00 May Be ed to Fees	
11.		OFFICERS AND	DIRECTORS	12.		ADI	DITIONS/CHANGES TO OFFI	CERS AN	D DIRECTO	RS IN 11	
STREET ADDRESS 1	eters, r	CK OLIVE LANE	☐ Delete					•	☐ Change	☐ Addition	
STREET ADDRESS 1	eters, d 9434 bla 900a rat	CK OLIVE LANE	☐ Delete		1				☐ Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP	.	,. <u> </u>	□ Delete	-		-	್ ಆಯ ಜಿನ್ನಲ್ ಇಷ್ಟು ಸ		Change	- ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	1					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		1				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			. Delete		I		•		Change	Addition	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OF BRINTED NAME OF SIGN

CR2E034 (9/01)

CUSTOM WOOD CREATIONS INC.

Attackment 10#253208 BU131865

13800

65-0179769 - 153208

150.00

_PRODUCT # L-MP40 ____

4/26/02 13800 FLORIDA DEPT OF STATE

\$150.00

51N321 (9/00) 149151

Attockment 10#153208 BU131805

Memorandum

Date: JULY 2, 2002

Subject: REINSTATEMENT

CORPORATION

From: CUSTOM WOOD CREATIONS INC

Name: DEBBIE PETERS Phone number: 954-971-8156

Typist's initials: DP:

To: REINSTATEMENT DIVISION

Name: L53208

···- 65-0179769

.cc

□☑ Enclosures

□ Attachments

Notes:

ENCLOSED PLEASE FIND THE COPY OF THE CORPORATE RETURN THAT WAS MAILED ON APRIL 26, 2002. I HAVE ENCLOSED A COPY OF THE BOTTOM PORTION OF THE CHECK STUB FOR YOUR REFERENCE. AS PER MY DISCUSSION WITH EULA AT THE DEPARTMENT OF CORPORATIONS, THIS IS WHAT I WAS TOLD TO DO IN ORDER FOR THIS TO BE REINSTÂTED. TÂM NOT PUTTING A STOP PAYMENT ON THE OTHER CHECK THAT WAS PREVIOUSLY SENT. IF YOU DO RECEIVE IT PLEASE FORWARD IT BACK TO MY OFFICE OR DESTROY THE CHECK. THANKING YOU IN ADVANCE FOR YOUR TIME AND COOPERATION IN THIS MATTER. AS YOU CAN SEE IF YOU WERE TO REVIEW THE COMPANIES HISTORY IT HAS NEVER BEEN LATE

IN TWELVE YEARS SINCE	INCORPORATED.
CIONED DEPOS DETERM	
SIGNED: DEBRA PETERS	DATED: JULY 2, 2002
SINCERELY,	

DEBBIE PETERS

CC: ENCLOSURES