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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE

L91500

(3)

PRIME CABINETS, INC.				à (Baigle and Idia) biade pelle Date	I BBIL GLOW BLOW BYGIT BIERT GLOCK BIGHT SERV
ncipal Place of	f Business	Mailing Address			
4471 S. DIXIE					
MIAMI FL 8817	A —→	- MINNI TE SOTTO -		3. Date Incorporated or Qualified	3a. Date of Last Report
				07/25/1990	01/20/1995
Principal Plac	e of Business	2a. Mailing Address	1-0-15	4 EEI Number	Applied For
6604	TARREGA STRE		432345	65-0218214	Not Applicab
Suite, Apt. #,	etc.	Suite Apt #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
0.00		City 8 State		6. Election Campaign Financing	\$5.00 May Be
City & State	AL GABLES, F		FL	Trust Fund Contribution	Added to Fees
Zip	Country	Zio	Country	8. This corporation has liability for	intangibie tax under s. 199.032,
331	46 25 U.S.I	A. 29 33243·2345	30 V.S.A.	Florida Statutes Yes 10. Name and Address of New I	S No
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New	registered rigori
			! !		
	IS, JAMES F.		82 Street Addr	ress (P.O. Box Number is Not Accepta	≝ga str <i>ee</i>
	DIXIE HIGHWAY		83	BO-1 HAM	
MIAMI FL	- 33176				
			84 City CO	RAL GABLE	5 FL 33146
Durayant to	the provisions of Sections 607.050	12 and 607, 1508. Florida Statutes	, the above named corpo	ration submits this statement for the proof of directors. Thereby accept the ap-	urpose of changing its registered of
or registere familiar with	o the provisions of Sections 607.050 ad agent, or both, in the State of Fio n, and accept the obligations of Sec	ction 607,0505. Florida Statutes		<u> </u>	1996
			•	20	14. WI - 1 1 1 -
SNATURE	Squate of the state of the stat	A CHANCE	Registerics Agent suprature requi	Contain months	DA'E
يب	South years you Parenting Shirt age OF HOERS A	via dove tavajene (NOT) NO DIRECTORS	Regional: Agent signature requir	Contain months	DATE FICERS AND DIRECTORS IN 12
<u>ب</u>	OFFICERS A	ক্ষুব্ৰ চাৰ বিভাগ কৰিব কৰে	13.	Contain months	DATE FICERS AND DIRECTORS IN 12
LE	POT POTAMOS, JAMES F.	via dove tavajene (NOT) NO DIRECTORS	Regional Agents platancing in 13. 1 1 Hitte 12 NAME	Contain months	DATE FICERS AND DIRECTORS IN 12
LE ME	PDT POTAMOS, JAMES F. 6604 TARREGA ST.	via dove tavajene (NOT) NO DIRECTORS	13. 1 1 HIGE 12 NAME 1 3 STREET ADDRESS	Contain months	DATE FICERS AND DIRECTORS IN 12
LE ME REET ADDRESS Y-ST-ZIP	POT POTAMOS, JAMES F. 6604 TARREGA ST. CORAL GABLES FL	OBJUSTANÇAR (EDÎS NO DIRECTORS DELETE	13. 1 1 HILE 12 NAME 13 STREET ADDRESS 14 CITY ST-ZIP	Contain months	CATE FICERS AND DIRECTORS IN 12 Change Addition
LE ME REET ADDRESS Y-ST-ZIP	POT POTAMOS, JAMES F. 6604 TARREGA ST. CORAL GABLES FL DVS	via dove tavajene (NOT) NO DIRECTORS	13. 1 1 HIGE 12 NAME 1 3 STREET ADDRESS 1 4 CTY ST-ZIP 2 1 HIGE	Contain months	DATE FICERS AND DIRECTORS IN 12 Change Addition
LE ME REET ADDRESS Y-ST-ZIP LE ME	POT POTAMOS, JAMES F. 6604 TARREGA ST. CORAL GABLES FL DVS POTAMOS, SONIA E.	OBJUSTANÇAR (EDÎS NO DIRECTORS DELETE	13. 1 1 HILE 12 NAME 1 3 STREEL ADDRESS 1 4 CITY SI-7IF 2 1 HILE 2 2 NAME	Contain months	DATE FICERS AND DIRECTORS IN 12 Change Addition
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LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS (Y-ST-ZIP LE ME REET ADDRESS	POT POTAMOS, JAMES F. 6604 TARREGA ST. CORAL GABLES FL DVS POTAMOS, SONIA E. 6604 TARREGA ST.	DELETE	13. 1 1 THEE 12 NAME 13 STREEL ADDRESS 14 CITY ST-ZIP 2 1 THEE 22 NAME 23 STREEL ADDRESS 24 CITY-ST-ZIP 3 1 THEE 32 NAME 33 STREEL ADDRESS 34 CITY-ST-ZIP 31 THEE 32 NAME 33 STREEL ADDRESS 34 CITY-ST-ZIP	Contain months	CATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
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INTERNAME OF SIGNING OFFICER OF DIRECTOR S. POTAMOS 42096