

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Montiam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 17 PM 1:26

DOCUMENT # M12026

(4)

1. Corporation Name

DON DANIEL CARPENTRY INC.

Principal Place of Business

22190 S.W. 98 COURT
MIAMI FL 33190

Mailing Address

22190 S.W. 98 COURT
MIAMI FL 33190

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/27/1985

3a. Date of Last Report

01/24/1994

4. FEI Number

59-2498517

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☐ No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

DANIEL, DONALD A.
8 PALMS PLAZA
HOMESTEAD FL 33030

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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

(Signature of person authorized to sign this report) (Signature of person authorized to sign this report) (Signature of person authorized to sign this report)

12. OFFICERS AND DIRECTORS

NAME	P
NAME	DANIEL, DONALD A.
STREET ADDRESS	8 PALMS PLAZA
CITY, ST, ZIP	HOMESTEAD FL
NAME	ST
NAME	DANIEL, ANNA R.
STREET ADDRESS	8 PALMS PLAZA
CITY, ST, ZIP	HOMESTEAD FL
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 199.032, Florida Statutes. I further certify that the information is not included in the annual report or supplemental annual report of this corporation and that my signature shall have the same legal effect as if made under oath. This filing is effective on the date of the filing of this report or the date of the filing of this report as required by Chapter 100, Florida Statutes, and that my name appears on the back of the filing of this report or on an attached statement with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

ANNA R. DANIEL

1/10/95

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2472151