

FILED

Mar 25 1997 8:00am  
Secretary of State

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                         |  |                                                                                                                                                                                                                         |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| PROFIT CORPORATION<br>ANNUAL REPORT<br>1997                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | <br>FLORIDA DEPARTMENT OF STATE<br>Sandra B. Mortham<br>Secretary of State<br>DIVISION OF CORPORATIONS |  | Mar 25 1997 8:00am<br>Secretary of State                                                                                                                                                                                |  |
| DOCUMENT # M14806 (7)<br>1. Corporation Name<br>T C CUSTOM CARPENTRY INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                         |  |                                                                                                                                       |  |
| Principal Place of Business<br>C/O AMEDIO SPINELLI<br>12201 NW 35TH STREET<br>CORAL SPRINGS FL 33065                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | Mailing Address<br>C/O AMEDIO SPINELLI<br>12201 NW 35TH STREET<br>CORAL SPRINGS FL 33065-2570                                                                                           |  | 3. Date Incorporated or Qualified<br>05/02/1985<br>3a. Date of Last Report<br>05/01/1996                                                                                                                                |  |
| 2. Principal Place of Business<br>21 Suite, Apt. #, etc.<br>22 City & State<br>23 Zip<br>24 Country                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | 2a. Mailing Address<br>26 Suite, Apt. #, etc.<br>27 City & State<br>28 Zip<br>29 Country                                                                                                |  | 4. FEI Number<br>59-2529721<br>5. Certificate of Status Desired<br>6. Election Campaign Financing<br>Trust Fund Contribution<br>8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes |  |
| 9. Name and Address of Current Registered Agent<br>SPINELLI, AMEDIO<br>12201 N.W. 35TH ST.<br>CORAL SPRINGS FL 33065                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                         |  | 10. Name and Address of New Registered Agent<br>81 Name<br>82 Street Address (P.O. Box Number is Not Acceptable)<br>83<br>84 City<br>85 Zip Code                                                                        |  |
| 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 _____ DATE _____<br>(NOTE: Registered Agent's signature required when reinstating)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                         |  |                                                                                                                                                                                                                         |  |
| 12. OFFICERS AND DIRECTORS<br>1.1 TITLE<br>1.2 NAME<br>1.3 STREET ADDRESS<br>1.4 CITY - ST - ZIP<br>1.5 CITY - ST - ZIP<br>1.6 CITY - ST - ZIP<br>1.7 CITY - ST - ZIP<br>1.8 CITY - ST - ZIP<br>1.9 CITY - ST - ZIP<br>1.10 CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                         |  |                                                                                                                                                                                                                         |  |
| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12<br>1.1 TITLE<br>1.2 NAME<br>1.3 STREET ADDRESS<br>1.4 CITY - ST - ZIP<br>1.5 CITY - ST - ZIP<br>1.6 CITY - ST - ZIP<br>1.7 CITY - ST - ZIP<br>1.8 CITY - ST - ZIP<br>1.9 CITY - ST - ZIP<br>1.10 CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                         |  |                                                                                                                                                                                                                         |  |
| 14. I do hereby certify that the information supplied with this form 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 as an attachment with an address. |  |                                                                                                                                                                                         |  |                                                                                                                                                                                                                         |  |
| SIGNATURE: AMEDIO SPINELLI, PRES.<br>3/18/97 (954) 344-8160                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                         |  |                                                                                                                                                                                                                         |  |

CR2E034 (9/96)