FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

FILED
Mar 29 1996 8:00 am
Secretary of State

DOCUMENT # **M58815** **(5)**

1. Corporation Name

MEYER LAMINATES, INC.

Principal Place of Business

1900 AUSTRALIAN AVE
2ND FLOOR
RIVIERA BEACH FL 33404

Mailing Address

1900 AUSTRALIAN AVE
2ND FLOOR
RIVIERA BEACH FL 33404

3. Date Incorporated or Qualified: **09/10/1987**

3a. Date of Last Report: **02/16/1995**

4. FEI Number: **65-0021341** — 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

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent

SULLIVAN, DAVID
1900 AUSTRALIAN AVE
2ND FLOOR
RIVIERA BEACH FL 33404

10. Name and Address of New Registered Agent

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 607.0505, 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 I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE

12. OFFICERS AND DIRECTORS

TITLE	C	☒ DELETE
NAME	PERRY, JGR	
STREET ADDRESS	1900 AUSTRALIAN AVE., 2ND FLOOR	
CITY-ST-ZIP	RIVIERA BCH FL	
TITLE	D	☐ DELETE
NAME	EDWARDS, MICHAEL	
STREET ADDRESS	1900 AUSTRALIAN AVE., 2ND FLOOR	
CITY-ST-ZIP	RIVIERA BCH FL	
TITLE	STV	☐ DELETE
NAME	SULLIVAN, DAVID	
STREET ADDRESS	1900 AUSTRALIAN AVE., 2ND FLOOR	
CITY-ST-ZIP	RIVIERA BCH FL	
TITLE	P	☒ DELETE
NAME	JAMES, CHARLES	
STREET ADDRESS	850 S HUGHEY AT GONE	
CITY-ST-ZIP	ORLANDO FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
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	VD	☒ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	STVD	☒ 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	~~[illegible]~~ DIRECTOR	☐ Change ☒ Addition
5.2 NAME	Fedden, Hin	
5.3 STREET ADDRESS	1900 AUSTRALIAN AVE. 2nd FLOOR	
5.4 CITY-ST-ZIP	RIVIERA BCH, FL	
6.1 TITLE	P	☐ Change ☒ Addition
6.2 NAME	JOHNSON, RODNEY	
6.3 STREET ADDRESS	1900 AUSTRALIAN AVE. 2nd FLOOR	
6.4 CITY-ST-ZIP	RIVIERA BCH, FL	

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 on an attachment with an alt address.

SIGNATURE: David Sullivan — DAVID SULLIVAN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/96
Date

407-842-4281
Daytime Phone #