	PORATION	1	RTMENT OF STATE 3. Mortham			
	AL REPORT		ry of State			
	1996		CORPORATIONS			
1. Corporation	AENT # M879	84 (4)				
	HARDWOODS, INC.					
Principal Place	of Business	Mailing Address				
3284 MORRIS		3284 MORRIS ST., NORT				
st. Petersbu Us	MG FL 33/13	st. Petersburg fl 33 Us	713	3. Date Incorporated or Qualified		-1
				07/01/1988	3a, Date of Last Report 04/25/1995	
_2. Principal Plac 21	ce of Business	2a. Mailing Address 26		4. FEI Number 59-2901536	Applied For Not Applicable	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5, Certificate of Status Desired	\$8.75 Additional	
22 City & State		City & State		6. Election Campaign Financing	Fee Required \$5.00 May Be	_
23	Country	28		Trust Fund Contribution	Added to Fees	
24	25	Zip 29	Country 30	8. This corporation has liability for in Florida Statutes Yes	ntangible tax under s 199.032, ☐ No	
	9. Name and Address of Curr	ent Registered Agent	81 Name	10. Name and Address #1 New Re	egistered Agent	
NEFF, DA				dress (P.O. Box Number is Not Acceptabl		_
	RRIS STREET, NORTH		83		·····	
SI. PEIC	RSBURG FL 33713					
			84 City		FL 85 Zip Code	
or registere	the provisions of Sections 607,050 d agent, or both, in the State of Fic , and accent the obligations of Sec	prida. Such change was authorized	, the above named corpo	pration submits this statement for the sum	soon of abanains its mainternal offer	
icorrinca: (PR)		ction 607 0505 Elorida Statutor	d by the corporation's boa	ard of directors. I hereby accept the appo	intment as registered agent. I am	Ð
SIGNATURE		ction 607.0505, Florida Statutes.	by the corporation's boat in the corporation of the corporation.	ard of directors. I hereby accept the appo	oose of changing its registered once intment as registered agent. I am	Ð
	ignature, typed or printed name of registered age	ction 607.0505, Florida Statutes.	Bugistered Agent signature require	ard of directors. I hereby accept the appo	intment as registered agent. I am	
12. TIILE	ingnature, types or printed hains of registered age OFFICERS A D	ction 607.0505, Florida Statutes.	Bogistered Agent signature require 13. 1 1TILE	and of directors. I hereby accept the appo	intment as registered agent. I am	(12/95)
s 12.	D NEFF, DALE G. 3284 MORFIS ST., NORTH	ction 607.0505, Honda Statutes.	Bugistered Agent squature require 13.	and of directors. I hereby accept the appo	DATE CERS AND DIRECTORS IN 12	(12/95)
STREET ADDRESS CITY - ST - ZIP	Ignature, types or printed name of registered age OFFICERS A D NEFF, DALE G. 3284 MORRIS ST., NORTH ST. PETERSBURG FL	Ction 607.0505, Florida Statutes.	Bugistered Agent signature require Registered Agent signature require 13. 1 11TLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-2IP	and of directors. I hereby accept the appo	DATE CERS AND DIRECTORS IN 12 CRS AND DIRECTORS IN 12 CRAnge Add.tion	2E034 (12/95)
STREET ADDRESS	D NEFF, DALE G. 3284 MORFIS ST., NORTH	ction 607.0505, Honda Statutes.	Bugistered Agent squarors boo Rugistered Agent squarors require 13. 1 1 TITLE 1 2 NAME 1 3 STREET ADDRESS	and of directors. I hereby accept the appo	DATE CERS AND DIRECTORS IN 12	(12/95)
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