

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000019946

FILED
May 02, 2002 8:00 AM
Secretary of State

Entity Name: WOODWORK RESTORATIONS, INC.

Current Principal Place of Business:

910 LINWOOD TERR.
LUTZ, FL 33549

New Principal Place of Business:

9242 LAZY LANE
TAMPA, FL 33614

Current Mailing Address:

910 LINWOOD TERR.
LUTZ, FL 33549

New Mailing Address:

9242 LAZY LANE
TAMPA, FL 33614

FEI Number: 59-3631970

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANSEN, BRADLEY
910 LINWOOD TERR.
LUTZ, FL 33549

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HANSEN, BRADLEY
Address: 910 LINWOOD TERR.
City-St-Zip: LUTZ, FL 33549

Title: ST () Delete
Name: HANSEN, NIA
Address: 910 LINWOOD TERR.
City-St-Zip: LUTZ, FL 33549

Title: VP () Delete
Name: VIZCARRONDO, MIKE
Address: 3304 KNIGHTS AVE
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NIA HANSEN

ST

05/02/2002

_____ Electronic Signature of Signing Officer or Director

_____ Date