FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Amendment

FILED
02 SEP 17 PM 4:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000045710

1. Entity Name: F & R Cabinetry and Millwork, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2305 East 11th Ave	2305 East 11th Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Hialeah, Florida	City & State: Hialeah, Florida
Zip: 33013 Country: U.S.A.	Zip: 33013 Country: U.S.A.

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-1005445 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: IRMA RODRIGUEZ

Street Address (P.O. Box Number is Not Acceptable): 572 West 65 Drive

City: Hialeah FL Zip Code: 33012

8. 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: Irma Rodriguez 8/31/2002
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1, Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE (P)	IRMA RODRIGUEZ (President)
NAME	
STREET ADDRESS	572 West 65 Drive
CITY-ST-ZIP	Hialeah, Fl 33012
TITLE (V)	VICE-PRESIDENT / TREASURER
NAME	ARLENE TRUJILLO
STREET ADDRESS	18010 NW 78 COURT
CITY-ST-ZIP	HIALEAH, FL 33015
TITLE	
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13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Irma Rodriguez 8/31/2002 305 835-7007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #