

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000019051

Entity Name: CE WOOD AND FRAMES CORP.

FILED
May 29, 2009
Secretary of State

Current Principal Place of Business:

12705 NW 42 AVE
OPA LOCKA, FL 33054

New Principal Place of Business:

5785 NW 112 TER
HIALEAH, FL 33012

Current Mailing Address:

P.O. BOX 22489
HIALEAH, FL 33002

New Mailing Address:

5785 NW 112 TER
HIALEAH, FL 33012

FEI Number: 04-3607285

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, CHESTER B
12705 NW 42 AVE
OPA LOCKA, FL 33054 US

Name and Address of New Registered Agent:

WILLIAMS, CHESTER
5785 NW 112 TER
HIALEAH, FL 33012 US

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: CHESTER WILLIAMS

05/29/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDST () Delete
Name: WILLIAMS, CHESTER B
Address: 12705 NW 42 AVE
City-St-Zip: OPA LOCKA, FL 33054

Title: D (X) Delete
Name: LIPANI, JR, THOMAS
Address: 12705 NW 42 AVE
City-St-Zip: OPA LOCKA, FL 33054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDST (X) Change () Addition
Name: WILLIAMS, CHESTER
Address: 5785 NW 112 TER
City-St-Zip: HIALEAH, FL 33012

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CHESTER WILLIAMS

PSDT

05/29/2009

Electronic Signature of Signing Officer or Director

Date