


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2004 8:00 am
Secretary of State

07-09-2004 90008 018 ***150.00

DOCUMENT # P02000049578	
1. Entity Name HENNESSEY'S CUSTOM MILLWORK CORP	

Principal Place of Business 13018 SW 120 STREET MIAMI, FL 33186	Mailing Address 13018 SW 120 STREET MIAMI, FL 33186
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54061083



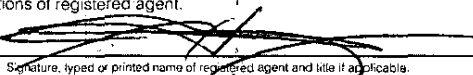
2. Principal Place of Business 11981 SW 144 CT. Suite, Apt. #, etc. Suite 111 City & State MIAMI, FL Zip 33186 Country	3. Mailing Address 11981 SW 144 CT. Suite, Apt. #, etc. Suite 111 City & State MIAMI, FL Zip 33186 Country
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06302004 Chg-P CR2E034 (10/03)

4. FEI Number 71-0871135	Applied For <input type="checkbox"/> Not Applicable
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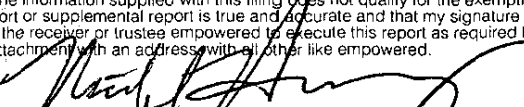
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HENNESSEY MUGFORD, MARITZA 13018 SW 120 STREET MIAMI, FL FL	7. Name and Address of New Registered Agent Name Maritza Hennessey Mugford Street Address (P.O. Box Number is Not Acceptable) 11981 SW 144 CT. Suite 111 City MIAMI FL Zip Code 33186
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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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE: 	DATE: 6/30/04

FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HENNESSEY, MICHAEL J 153 BRITTLE LANE MIAMI, FL 33186 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Michael J. Hennessey 15734 SW 43 TER. MIAMI FL 33185
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V MUGFORD, MARITZA H 13018 SW 120 STREET MIAMI, FL 33186 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Maritza Hennessey Mugford 15734 SW 43 TER. MIAMI FL 33185
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.	
SIGNATURE: 	DATE: 6/30/04 305-387-2929