

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 08, 2006 8:00 am
Secretary of State

09-08-2006 90001 030 ***150.00

60038621



08302006 Chg-P CR2E034 (11/05)

4. FEI Number
91-2057387

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DOCUMENT # P04000146070

1. Entity Name
WILFRED MARTIN TRIM CARPENTRY, INC.



Principal Place of Business
2016 CARLTON DR
ORLANDO, FL 32806

Mailing Address
2016 CARLTON DR
ORLANDO, FL 32806

2. Principal Place of Business
2415 S. Shine Ave

3. Mailing Address
2415 S. Shine Ave

Suite, Apt. #, etc.

City & State
Orl, FL

City & State
Orl, FL

Zip
32806

Country
USA

Zip
32806

Country
USA

6. Name and Address of Current Registered Agent

MARTIN, WILFRED
2016 CARLTON DR
ORLANDO, FL 32806

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 W. Martin DATE 8/30/06

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ \$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.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTIN, WILFRED 2016 CARLTON DR ORLANDO, FL 32806 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 exemptions contained 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 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: W. Martin DATE 8/30/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT

60038621

#P04000146070

WILFRED MARTIN TRIM CARPENTRY, INC.
2415 SOUTH SHINE AVENUE
ORLANDO, FLORIDA 32806
(321) 945-1011

August 30, 2006

Division of Corporations
P.O. Box 6198
Tallahassee, Florida 32314

RE: Wilfred Martin Trim Carpentry, Inc.

Dear Sir/Madam:

This letter is to advise you that there was a change in my address during the last reporting year. Therefore, I was unable to process the annual report fee as required due to delay in receiving the Annual Report Notice. I understand that it is my responsibility to report the changes as they occur, however, it was an oversight, therefore causing my incorporation to be subjected to late fees.

I am enclosing for your review a copy of the Annual Report Notice with the forward label for your records. Also enclosed is my check for \$150.00 to renew my incorporation.

Please note that my new and current address is 2415 South Shine Avenue, Orlando, Florida 32806. Thank you for your understanding and cooperation in this matter. Please feel free to contact me at the number listed above should you have any questions regarding this matter.

Sincerely,



Wilfred L. Martin
President
Wilfred Martin Trim Carpentry, Inc.