FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

May 16 1997 8:00am

Secretary of State

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DOCUMENT # P92000015088 (7)

HARVEST CARPENTRY, INC.

Principal Place	e of Business	•	Mailing Address				(100)25(115 12115)			
PO BOX 74	•		20815 NORTHEAST 16TH AVENUE							
BAY 6 HALLANDALE 6	FL \$3008	BAY 6 NORTH MIAMI BEACH FL 33179-2138								
US			,			3.	Date Incorporated or Qualified 12/24/1992	3a. Date of Last Report 05/09/1996		
	lace of Business	2a. Mailing Address				4.	FEI Number	l	IAI	oplied For
21		26					65-0379815		No	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	r unq			5.	Certificate of Status Desired			Additional
22 City & State										oquired
23	U	j				6.	Election Campaign Financing			May Be
Zip	Country	28	Zip Gountry				Trust Fund Contribution		Added	******
24	25	29	30	,		В.	This corporation has liability for Florida Statutes	intangible] Yes [. 199.037,
	9, Name and Address of Curre		100]	• • •		10.	Name and Address of New Re			
BLA	KE, JOHN J		81		Name					
	15 NORTHEAST 16TH AVENUE		82 Street Add			Idress (P.O. Box Number is Not Accoptable)				
BAY	' 6		DZ SHOOLAU			35 (I	.e. box Norriber is Not Accoptai	ло)		
NOF	7TH MIAMI BEACH FL 33179		83				The second secon			
			84	Ī	Спу			FL	85 Zip (Code
11. Pursuant i	to the provisions of Sections 607.05	02 and 607.1508, Florida Stal	utes, the abov	.L 70-1	named corpor	ratio	n submits this statement for the p		f changing it	ts registered
office or re	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig	e of Florida, Such change was	s authorized b	γI	the corporation	o's t	poard of directors. I hereby acce	pt the app	ointment as	registered
	William Willia and accept the con-	gations or, sociton our .coco, i	i lornia otalule	. O.						
SIGNATURE	Signature, typed or printed name of registered as	pent and title if applicable (No	OTE: Registered Ag	icnt	t signature required	when	reinstating)	DATE		
12.		ND DIRECTORS	13.			/	ADDITIONS/CHANGES TO OFFIC	CERS AND	DIRECTOR	3S IN 12
TITLE	PTD	DELETE	1.A TITLE						Change	Addition
NAME	BLAKE, JOHN J	4V A	1.₽ NAME							
STREET ADDRESS	20815 N.E. 16TH AVENUE BA		1.\$ STREF	LAI	IDDRESS					
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33 VSD			SI-	-20 ^p				777	
TITLE	DI AVE CANDDA		2.1 1111.6			EJ CHA		Change	Addition	
STREET ADDRESS	20815 N.E. 16TH AVENUE BA	AY A	2.2 NAME 2.8 STREET ADDRESS		INDICOC.					
CITY-ST-ZIP NORTH MIAMI BEACH FL 3317			2.4 CITY-S1-ZIP		j					
TITLE		DELETE	3.1 1011		1 - 211,				Change	Addition
NAME	•		3.Þ NAME		1					
STREET ADDRESS			3.8 STREE		ADDRESS					
CITY-ST-ZIP			3.4. Cr) Y-		ŧ					
TITLE		DELETE	4.1 TITLE						Change	Addition
NAME			4.'2 NAME							
STREET ADDRESS			4.8 STREE	I Al	ADDRESS					
CITY-ST-ZIP			4.4 CITY- 5	\$1-	-71P					
TITLE		DELETE	5.1 TITLE						Change	Addition
NAME			5.9 NAME							
STREET ADDRESS			5.8 STREE	I A	ADDRESS					
CITY-ST-ZIP		· ···· · · · · · · · · · · · · · · · ·	5 # CHY-5	\$1.	- 7IP					
TITLE		L_I DETETE	6.1 TITLE						L Change	Addition
NAME			6 8 NAME							
STREET ADDRESS			6 \$ STREE							
City-St-ZiP	by certify that the information supplie	ad with the filing done not our	6 (CHY-5	·	and the same of the contraction	, e.	ction 119 07/2)/i) Florida Crouse	o Huelbe	coodile the	tho
informatio I am an of	by Centry that the information suppling in indicated on this armual report or fficer or director of the corporation on Block 12 or Block 13 if changed, a	supplemental annual report is or the receiver or trustee empo	strue and acc owered to exec	ura	ate and that m	ny si	gnature shall have the same lega	al offect as	s if made un	der oath; that