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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

P93000040986 (0) DOCUMENT

GREENBLATT CARPENTRY, INC.

Principal Place	ol Business	Mailing Address			911 06 110 (010) 10110 0111 1001
10823 TAMIAMI TR N. 10823 TAMIAMI T		10823 TAMIAMI TR. N.			
G G					
NAPLES FL 34108 NAPLES FL 34108			DO NOT WRITE IN THIS	SPACE	
US		US		3. Date Incorporated or Qualified	
2 Principal Pla	ace of Business	2a. Mailing Address		06/10/1993 4. FEI Number	Auntin d'Eur
21	TOP OF BUSINESS	26			Applied For Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			65-0415911	\$8.75 Additional	
22			5. Certificate of Status Desired	Fee Required	
City & State City & State				6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Z ip	Country	Zip	Country	8. This corporation owes or has paid the ci	urrent year Intangible
24		29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered	Ağent
	ITIO, JOYCEANNA		81 Name		
10261 WINDSOR WAY			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
NAPLES FL 33942					
			83		
			84 City	P-i	85 Zip Code
44 2	#	0 1 007 4500 51-11- 01-1		FI	- 1
office or re	gistered agent, or both, in the State	of Florida. Such change was a	es, the above-hamed col authorized by the corpora	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	pointment as registered
agent. I am	familiar with, and accept the obliga	ations of, Section 607.0505, Flo	orida Statutes.	,	
SIGNATURE =	Signature, typed or printed name of registered age	ont and title it emplicable (N/OT	E: Registered Agent signature requ	uired when reinstating) DATE	
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		Change Addition
NAME	GREENBLATT, DAVID Z.		1.2 NAME].
STREET ADDRESS	700 GROVE DR		1.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL		1.4 CITY-ST-ZIP		}
TITLE	VSTD	DELETE	2.1 1ITLE		Change Addition
NAME	RAUTIO, JOYCEANNA J		2.2 NAME		
STREET ADDRESS	10261 WINDSOR WAY		2,3 STREET ADDRESS		ĺ
CITY-ST-ZIP	NAPLES FL		2. 4 CITY - ST - ZIP		
TITLE	VD	☐ DELETE	3.1 TITLE		Change L Addition
NAME	GREENBLATT, TERRI L		3.2 NAME		
STREET ADDRESS	700 GROVE DRIVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL	- Document	3.4. CITY-ST-ZIP		
TITLE		L) DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			. 4. 2 NAME		1
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	4.4 CITY - ST - ZIP		Change Addition
TITLE NAME			5.1 TITLE 5.2 NAME		
STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS		ļ
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME		tall reserve	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		,
	while that the information cumplied w	ith this filing does not qualify for		n Section 119 07(3Vi) Florida Statutes I further o	ortify that the information

interest ceruly that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statules. I further certify that the information indicated on this annual report or supplemental annual 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 justee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

Toychanna T. Kautro

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FILED

Apr 07 1998 8:00am

Secretary of State