


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

(1)

0033078

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortharp Secretary of State DIVISION OF CORPORATIONS
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FILED

98 JUL 15 AM 9:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # **P93000059759 (9)**

1. Corporation Name

GROSSE POINTE WOODWORKING, INC.

Principal Place of Business

**2520 NORTHWEST 16TH LANE
BAY 1
POMPANO BEACH FL 33064**

Mailing Address

**2520 NORTHWEST 16TH LANE
BAY 1
POMPANO BEACH FL 33064**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/23/1993

4. FEI Number

65-0424876

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

**DE SOSTOA, ROBERT J
5523 NORTHWEST 41ST AVENUE
COCONUT CREEK FL 33073**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	DE SOSTOA, ROBERT J	
STREET ADDRESS	5523 NORTHWEST 41ST AVENUE	
CITY-ST-ZIP	COCONUT CREEK FL 33073	

TITLE	D	<input type="checkbox"/> DELETE
NAME	DE SOSTOA, MILAGROS	
STREET ADDRESS	5523 NORTHWEST 41ST AVENUE	
CITY-ST-ZIP	COCONUT CREEK FL 33073	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	

3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	

4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	

5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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 trustee 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.

SIGNATURE

REQUIRED

2/2/98

(754)972-4950

CR2E034 (5/98)

GPW, Inc.

2620 NW 16 Lane
Suite #1
Pompano Beach, Florida 33064

(2)

July 7, 1998

Annual Reports Filings
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

To Whom It May Concern:

Enclosed please find a check for \$150.00 for the 1998 Profit Corporation Annual Report, originally due on May 1, 1998.

I am seeking abatement of the delinquency fee due to circumstances that were somewhat beyond my control. I was in a rather serious automobile accident that prohibited me from working for a quite some time. I communicated to my accountant the need to file by May 1. However, poor performance on his part and my inability to go to the office resulted in my failure to file. I am essentially a one-man operation and because of the incredible backlog of correspondence upon my return to work, the original filing notice was overlooked.

Sincerely,



Robert de Sostoa