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

DOCUMENT # P94000014519 (0)

FINAL TRIM MASTERS, INC.

FILED Apr 22 1998 8:00am Secretary of State

1 64 45.9F 1 1 16641 14	NOTERIO, 1140:				
Principal Place of Busin	ness	Mailing Address		- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	DAN DADON DANDI INDIB 1004 1901
6107 S.W. 36TH STREET		6107 S.W. 36TH STREET			
FT. L'AUDERDALE FL 33314		FT. LAUDERDALE FL 33314			
				DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	
2. Principal Place of B	ringer	2a, Mailing Address		02/22/1994 4. FEI Number	
21		26		65-0470391	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
22		27		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
Zip	Country	7ip	Country	8. This corporation owes or has paid the cu	
24	25	29	30	,	Yes No
9, Na	me and Address of Current	Registered Agent		10. Name and Address of New Registered	Agent
Wilson, N			81 Name		
6107 S. W. 36TH STREET			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
FT. LAUDERDALE FL 33314					
			83		
			84 City		85 Zip Code
			1 1 1	Fl	_
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 register office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as register					
agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
	ped or punted name of registered agent		Registered Agent signature requir		
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AN	
	ON, NORMAN R	DLECTE	1.1 TITLE		Change Addition
8407	S.W. 36TH STREET		1.2 NAME		
PT I	AUDERDALE FL 33314		1.3 STREET ADDRESS		
CITY-ST-ZIP P1. L		DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME		C) bitter	2.2 NAME		C cuange C Vocation
STREET ADDRESS			23 STREET ADDRESS		
CITY-ST-ZIP					
TITLE		DELETE	2 4 CITY-ST-ZIP 3 1 TITLE		Change Addition
NAME		□ *******	3.2 NAME		L Onlinge Roomen
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		,
TITLE		DELETE	4.1 Tifle		Change Addition
NAME			4. 2 NAME		Ondings yiddition
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - \$1 - ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY- ST- ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
44 (1)				<u></u>	

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 armual 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 of on an attachment with an address.

SIGNATURE: // Air's

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:R2E034 (10/97)