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**

DOCUMENT # P9400024054 (6)

C & R CUSTOM WOODWORKING, INC.

FILED Apr 18 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 276\$\text{NW 30TH AVE} 278\$\text{NW 30TH AVE} LAUDERDALE LAKES FL 33311 LAUDERDALE LAKES FL 333 US US)		Date Incorporated or Qualified 3a. Date of Last Report				
						03/28/1994	02/	22/1996	-r- +· ·	
2. Principal P	lace of Business	2a. Mailing Address		~ ~		4. FEI Number	<u> </u>	· · · · · · · · · · · · · · · · · · ·	plied For	
21		26	_			65-0477537			t Applicable	
Suite, Apt 22	#, etc.	Suite, Apt. #, etc.	27			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
Cily & Stat	е	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added t		
Zip	Country	Zip		intry		8. This corporation has liability for			199.032,	
24	25	[29]	30	r			Yes			
	9, Name and Address of Curre	ent Registered Agent		81	Name	10. Name and Address of New Re	gistered	Agent		
	ES, JRTS			61	Name					
1041 ALABAMA AVENUE				82	Street Add	Address (P.O. Box Number is Not Acceptable)				
FT. LAUDERDALE FL 33312										
				83						
				84	City			85 Zip (Code	
						rporation submits this statement for the p	<u>FL</u>			
SIGNATURE	Signature hyperior paraectinance of registered a					ation's board of directors, I hereby acception of the state of the sta	DATE			
TITLE	P	DELETE		TLE		AHES Thomas J			Addition	
NAME	CATES, JR T S		1.2 N	AME	'	041 AlABAMA Are	U ,	./		
STREET ADDRESS	1041 ALABAMA AVENUE		1.3 \$	TREET .	ADDRESS /	OF MIHONAN II.C.				
CITY ST ZIP	FT. LAUDERDALE FL		1.4 C	TY-S1	T-ZIP	Ct LANDENNIEIK	1			
THILE	V	D£LETE	2.1 TI					Change	Addition	
NAME	CATES, THOMAS J JR.		2.2 N	AME						
STREET ADDRESS	1041 ALABAMA AVE		2.3 \$	TAEET.	address		•			
CITY ST-200	FT LAUDERDALE FL		2.40	HTY-S	ST-ZIP					
TITLE		DELETE	3 1 TI	TLE	Ţ			Change	Addition	
NAME			32 N	AME						
STREET ADDRESS			33\$	THEET	address					
CITY-ST-ZiF				HY-S	ST- ZIP					
TiffLt		☐ DELETE						L Change	Addition	
NAME		•	4.21		1					
STREE! ADDRESS					ADDRESS					
CITY - S? - ZIP	***************************************	NP. PVF		ITY-S	T-ZIP			Obsect	1 4 4 4 6 6 6 6	
TITLE		☐ DELETE						☐ Change	Addition	
NAME			5.2 N							
STREET ADDRESS					ADDRESS					
CITY ST-7IF		DEVETE		ITY-S	7-2IP			Change	Addition	
THE		☐ DELETE					•	Change	LT MODITION	
NAME			6.2 N							
STREET ADDRESS					ADDRESS					
CHY-ST-ZIF			6.4 C	ITY - S	T-ZIP					

14. I do 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.