FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

1996			DIVISION OF CORPORATIONS					
DOCUN 1. Corporation	/ENT # F	9400002	7387	(7)				
SPECI	AL WOODWORK	INC.				4 188/488/ 448 18:11 6:44 84/4 84/4 84		
Principal Place	of Business	Mailir	ng Address			I INFIFENT IID INFIFE BIDIT ANIII AN		
			918 WEST 18TH					
HIALEAH FL	. 33012	H	NALEAH FL 33012	!				
			The second secon	·		3. Date Incorporated or Qualified 04/11/1994	3a. Date of Last Report 05/01/1995	
2. Principal Pia 21 797	ce of Business O West 29	25 th Ave 26 7970 West 25 th ave			25th ave	4. FEI Number 65-0491656	Applied For	
Suite, Apt. #		5 7 · C 20 S	uite, Apt #, etc.	(58)			Not Applicable \$8.75 Additional	
22		27				5. Certificate of Status Desired	Fee Required	
Orty & State 23 HIC	alean	FL 28 1	ity & State fidea		FL.	Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees	
Zip 3 30	Country		33016	30 Cc	untry しらね	8. This corporation has liability for in Florida Statutes		
	9. Name and Addres	s of Current Register			7-07.3	10. Name and Address of New R		
					81 Name			
MURILLO, JORGE E					82 Street Addre	at Address (P.O. Box Number is Not Acceptable)		
5918 WEST 18TH COURT								
HIALEA	H FL 33012				83			
					84 City		FL 85 Zip Code	
or registere familiar with	ed agent, or both, in the S i, and accept the obligati	State of Florida: Such of ions of, Section 607.05	nange was autho 95, Florida Statut	rized by the	ove named corpora corporation's board	ation submits this statement for the pur d of directors. I hereby accept the appo	pose of changing its registered office pintment as registered agent. I am	
s	Signature, typest or pricted had elo				d Agent signature required	where for clairings	CIATE	
12.		FICERS AND DIRECTO	DRS DELETE	13.	T	ADDITIONS/CHANGES TO OFFI		
NAME	PSTD Murillo, Jorge	: c	[] beccie		THTLE NAME		Change Addition	
STREET ACDRESS	5918 WEST 18TH				STHEET ADDRESS			
CITY - ST - ZIP	HIALEAH FL 330			and the second	CITY - ST - ZIP			
TITLE			DELETE	2 1	TITLE		Change Addition	
NAME				221	AAME			
STREET ALORESS				23	STREET ADDRESS			
CITY-ST-ZIP					DITY-ST-ZP			
TITLE			□ DEFEIF		T.TILE .		Change Addition	
NAME STREET ADDRESS					NAME			
CITY-ST-ZIP					STREET ADDRESS			
TITLE			DELETE		DITY ST-ZIP DITLE	900000183	Sharige Addition	
NAME					AAME	-05/20/36010	61008	
STREET ACORESS					STREET ADDRESS	***200.00		
CITY-ST-ZIP					CITY - ST - ZIP			
TITLE			DELFIE	5 1	TiTLF		☐ Change ☐ Addition	
NAME				52	3MA¥			
STREET ADDRESS				53	STREET ADDRESS			
CITY-ST-ZIP			C DESCRIPTION		CITY-ST-ZIP			
TITLE			DELETE		TITLE		☐ Change ☐ Addition	
NAME STREET ADDRESS					JAME STREET ADDRESS		5-1-96	
DITTLE LANDERS 1				■ C 3 3	1 663/NUMB 13:010		- -	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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

6 3 STREET ADDRESS

6 4 CITY - ST - ZIP

SIGNATURE: -

SIGNATURE AND TYPED OR PRINTED VAME OF SIGNING OFFICER OR DIRECTOR

5-6-96 Date Daytine Phore #