FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

DOCUMENT # **P94000038834 (5)**

1. Corporate Name

N & N CUSTOM TRIM, INC.

Principal Executive Office

2916 SW 22 CIRCLE APT B-1
DELRAY BEACH FL 33445

Mailing Address

2222 SPANISH TR
APT 4
DELRAY BEHAC FL 33483
US

2. Principal Place of Business

21 2222 Spanish Tr #4
Suite, Apt. or Bldg.
22 Apt 4
City & State
23 Delray Beach
24 33483 25 Palm Beach County

2a. Mailing Address

26 2222 Spanish Tr
Suite, Apt. or Bldg.
27 Apt #4
City & State
28 Delray Beach Fl.
29 33483 30 Palm Beach County

3. Date Incorporated or Qualified: **05/19/1994**

3a. Date of Last Report: **06/16/1995**

4. FEI Number: **65-0488371** — 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 has taxable income under s. 199.032, Florida Statutes: ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

NIKANDER, ROBERT J
2916 SW 22 CIRCLE APT B-1
DELRAY BEACH FL 33445

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 Section 607.0501(3), 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 and, if changing registered agent, the registered agent has previously, or concurrently, the corporation's board of directors has timely, accepted the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0501, Florida Statutes.

SIGNATURE: Robert J Nikander — 1-13-96

12 OFFICERS AND DIRECTORS

D
NIKANDER, ROBERT J
2222 SPANISH TR
DELRAY BEACH FL

☐ Delete

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1996

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a director or officer 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 above, or on an attachment with all other like empowered.

SIGNATURE: Robert J Nikander — 1-13-96 407-788-7811

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE

CR2E034 (12/95)