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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # **P94000084059 (2)**1. Corporation Name

RANDY'S CARPENTRY, INC.

FILED Feb 19 1997 8:00am Secretary of State

Principal Place of Business Mailing Address					F SANTIALI WA INKII BIS		Anini Haili dinik nulai B	KKE 1011 1004	
891 BRECKENRIDGE DRIVE 691 BRECKENRIDGE DRIVE PORT ORANGE FL 32127-7525 PORT ORANGE FL 32127-7525									
					3. Date Incorporated 11/14/1994	or Qualified	3a. Date of Last 04/11/1996	•	
2. Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number	·····		Applied For	
21 905.	Newcastle CT.	26 905 New CA	15116	<u>CT.</u>	59-3276595			Vot Applicable	
Suite, Apt 4	# etc.	Suite, Apt. #, etc.			5. Certificate of State	s Desired		Additional Required	
23 Huy	Ku, H.	City & State 28 / they / the			6. Election Campaigi Trust Fund Contrib	_		O May Be I to Fees	
Zip 24 3211つ		29 3 2.117	30 500	intry	Tiprod Clarates		Yes No	s. 199.032,	
	9. Name and Address of Current	Registered Agent		041 1	10. Name and Addre	ss of New Re	gistered Agent		
	NG, BRIAN R			81 Name					
					82 Street Address (P.O. Box Number is Not Acceptable)				
DAYT	ONA BEACH FL 32118			83			······································		
		•							
				84 City			FL 85 Zi	Code	
11. Pursuant t	o the provisions of Sections 607.0502	and 607,1508, Florida Statu	ites, the a	l l bove-named	corporation submits this state	ment for the p		its registered	
office or re	g stered agent, or both, in the State on familiar with, and accept the obligat	it Florida, Such change was	authoriza	d by the core	poration's board of directors, I	hereby accep	ot the appointment a	is registered	
	n rans as with, and accept the obligat	rons or, section early boot, r	iorida Sia	iules.					
SIGNATURE	egrative it prof or ported name of registered agoal	rand tise if applicable (NO	TE: Registere	d Agent signature	required when reinstating)		DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANG	GES TO OFFIC			
Title	PSD	☐ DELETE	117	TLE	P5D 401		Change	Addition	
IMAN	PARISH, PHYLLIS		1.2 N	1	PARISH, Phy	در ع دما کامان			
STREET ADDRESS	691 BRECKENRIDGE DRIVE			Treet address	BARDSTOWN, I PATTEN, RAM 1341 JULIUNT BARDSTOWN	r. Can	W-8121		
CITY - S1 - ZiP	PORT ORANGE FL 32127-7525	Dipologr		ITY-ST-ZIP	13 MEDSTEWS, 1	4 700	57-07-1	4.400-	
TITLE	VTD	☐ DELETE	2.1 T		VTD 0	- 1 21	PSI Change	Addition	
NAME	PATTON, RANDOLPH		2.2 N	1	BALLIN, KAN	DOLPH	_ :		
STREET ADDRESS	691 BRECKENRIDGE DRIVE			TREET ADDRESS	134170 min	W LIN	C. 	227	
CITY - ST - 7IP	PORT ORANGE FL 32127-7525	DELETE	3.1 7	CITY-ST-ZIP	134 RDSTOWN	1 King	Chance	Addition	
?Ifté			3.1 (3.2 N				_ Ell Onang	, Modition	
NAME CAMECT ASSOCIACE				ame Treet address					
STREET ADDRESS				CITY-ST-ZIP					
CITY-S1-Za*		DELETE	4.1 1			,	Change	Addition	
NAME			4.21				 = •		
STREET ACCIDENCES			1	TREET ADDRESS					
CITY+ST-ZIP				ITY-ST-ZIP					
THLE		DELETE	5.1 T		<u> </u>		Chang	Addition	
NAMe			5.2 N	AME					
STREET ADDM SS			538	TREET ADDRESS					
CITY ST-75			5.40	ITY-ST-ZIP					
1.1) E		☐ DELETE	6.1 7	ITLE			Chang	Addition	
NAME			6.2 N	ame	1				
STREET ADDRESS			6.3 S	TREET ADDRESS					
CETY - ST - ZIP			6.4 0	ITY-ST-ZIP					
14. I do herce informático I am an of appears in	y certify that the information supplied n indicated on this annual report or su ficer or director of the corporation or t n Block 12 or Block 13 if changed, or	with this filing does not qua ipplemental annual eport is the receiver or trustel empor on an attrichment with an ac	lify for the true and wered to idress.	exemption s accurate and execute this	tated in Section 119.07(3)(i), I that my signature shall have report as required by Chapter	the same lega 607, Florida S	s. I further certify that effect as if made is statutes; and that m	under oath; tha y name	

SIGNATURE:

SIGNALINE AND TYPED OR ESINTED NAME OF PRESIDENT OF DIRECTOR

Date .