FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 MAR 20 AM 7:58
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **P94000092345 (5)**

1. Corporation Name
ROYAL MILLWORK, INC.

W97-1821

REINSTATEMENT 95-97 ao

DO NOT WRITE IN THIS SPACE.

Principal Place of Business	Mailing Address
1125 N.E. 46TH ST. LIGHTHOUSE POINT FL 33432	1125 N.E. 46TH ST. LIGHTHOUSE POINT FL 33432

3. Date Incorporated or Qualified: 12/19/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 1708 N.W. BARCELONA WAY	26 1708 N.W. BARCELONA WAY.
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: BOCA RATON FLA	28 City & State: BOCA RATON FLA
24 Zip: 33432 25 Country: Palm Bch	29 Zip: 33432 30 Country: Palm Bch

4. FEI Number: 65-055 0123 ☐ 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 liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

WALKER, WAYNE S
1125 N.E. 46TH ST.
LIGHTHOUSE POINT FL 33432

10. Name and Address of New Registered Agent

81 Name: WAYNE S. WAIKER
82 Street Address (P.O. Box Number is Not Acceptable): 1709 NW ARCADIA
83
84 City: BOCA RATON, FL 85 Zip Code: 33432

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 registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: Wayne S. Walker WAYNE S. WAIKER 4/14/95
(Signature of new registered agent, if changed, or current registered agent required when reinstating) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	VICE PRESIDENT ☒ Change ☐ Addition
NAME	FOX, NANCY E	1.2 NAME	WAYNE S WAIKER
STREET ADDRESS	2262 ARBOUR WALK CR. #1622	1.3 STREET ADDRESS	321 NORWOOD TER APT 225
CITY-ST-ZIP	NAPLES FL 33942	1.4 CITY-ST-ZIP	BOCA RATON FLA 33431
TITLE	D	2.1 TITLE	PRESIDENT ☒ Change ☐ Addition
NAME	WALKER, WAYNE S	2.2 NAME	WAYNE S. WAIKER
STREET ADDRESS	1125 N.E. 46TH ST.	2.3 STREET ADDRESS	321 NORWOOD TER Apt 225
CITY-ST-ZIP	LIGHTHOUSE POINT FL 33942	2.4 CITY-ST-ZIP	BOCA RATON FLA 33431
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	000002119980--7
STREET ADDRESS		4.3 STREET ADDRESS	-03/20/97--01146--005
CITY-ST-ZIP		4.4 CITY-ST-ZIP	***1088.75 ***1088.75
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 Blocks 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Wayne S. Walker WAYNE S. WAIKER 4/14/95 561-367-0162
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0001855 FP