

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Jun 05 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # P95000004988 (8)

1. Corporation Name
WOODWORKING BY C & J, INC.



Principal Place of Business 5700 TAYLOR RD. A-1 BAY #7 NAPLES FL 33942 US	Mailing Address 5700 TAYLOR RD A-1 BAY #7 NAPLES FL 34109-1829 US
---	---

3. Date Incorporated or Qualified 01/17/1995	3a. Date of Last Report 05/01/1996
---	---------------------------------------

2. Principal Place of Business 21 3085 VAN BUREN AVE Suite, Apt. #, etc.	2a. Mailing Address 26 SAME Suite, Apt. #, etc.
--	---

22 City & State 23 NAPLES, FL. 34112 Zip 24 34112	25 Country 25 USA	27 City & State 28 Zip 29 Country 30
--	----------------------	---

4. FEI Number 65-0563763	Applied For Not Applicable
-----------------------------	-------------------------------

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	-----------------------------------

6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
--	--------------------------------

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent
HERNANDEZ, JORGE
2040 39TH STREET S.W.
NAPLES FL 33999

10. Name and Address of New Registered Agent 81 Name CURTIS JONES 82 Street Address (P.O. Box Number is Not Acceptable) 3530 - 15th AVE. S.W. 83 84 City NAPLES FL 85 Zip Code 34117
--

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 _____
Signature, typed or printed name of registered agent and title (if applicable) (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	JONES, CURTIS
STREET ADDRESS	5700 HOUGHIN STREET
CITY-ST-ZIP	NAPLES FL 33942
TITLE	<input type="checkbox"/> DELETE
NAME	HERNANDEZ, JORGE
STREET ADDRESS	2040 39TH STREET SW
CITY-ST-ZIP	NAPLES FL 33999
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	3085 VANBUREN AVE
1.4 CITY-ST-ZIP	NAPLES, FL. 34112
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-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)(j), 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.

SIGNATURE: _____ 4/30/97

CR2E034 (9/96)