

5395

PB000134790

Charter Number Only

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
MAY - 11 AM 9:45

Requester's Name
Lindsey Dunkley
Address
717 Ponce de Leon Blvd #326
City
Gables, FL 33134
State ZIP Phone

VALIDATION ONLY

700001475787
-05/04/95--01050--012
*****70.00 *****70.00

CORPORATION(S) NAME

Designer Woodworks, INC.

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | <input type="checkbox"/> Foreign | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Dissolution | <input type="checkbox"/> Other |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Change of Registered Agent |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Reservation | <input type="checkbox"/> Certificate Under Seal |
| <input type="checkbox"/> Photo Copies | <input type="checkbox"/> Call When Ready | <input type="checkbox"/> After 4:30 |
| <input type="checkbox"/> Call If Problem | <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Mail Out |
| <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up | |

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

5/4/95
78

EMPIRE Toll Free: 1-800-432-3028

ARTICLES OF INCORPORATION

OF

Designer Woodworks, Inc.

ARTICLE I - NAME

The name of the corporation is Designer Woodworks, Inc.

ARTICLE II - DURATION

This Corporation is to exist perpetually.

ARTICLE III - PURPOSE

This Corporation is organized to engage in any act or business permitted under the laws of the United States of America and the State of Florida.

ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue 7,500 shares of common stock with a par value of one dollar (\$1.00) per share.

FILED
SERIAL-4
MAY 9 1965
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V - PREEMPTIVE RIGHTS

Every. shareholder. upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds shall have the right to purchase his prorata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENTS

The street address of the initial registered office and principle place of business of this corporation is 1631 West 38th Pl. # 1506-A Hialeah, Florida 33012 and the name of the initial registered agent of this corporation at that address is Alexis Acosta.

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have ONE (1) director initially.

The number of directors may either be increased or diminished from time to time by the bylaws, but shall never be less than one (1).
the name and address of the initial director of this corporation is:

NAME	ADDRESS
Alexis Acosta (President)	3626 SW 112 Ave. Miami, FL 33165

ARTICLE VIII - INCORPORATOR

The name and address of the incorporator is:

NAME	ADDRESS
Alexis Acosta	3626 SW 112 Ave. Miami, FL 33165

ARTICLE IX - BYLAWS

The power to adopt, alter, amend or repeal bylaws shall be vested in the board of directors.

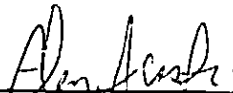
ARTICLE X - INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

ARTICLE XI - AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment thereof, and any right conferred upon the shareholders is subject to this reservation.

Executed by the undersigned Incorporator this 03. day of May 1995



Alexis Acosta

STATE OF FLORIDA)
 : SS
COUNTY OF DADE)

The foregoing Articles of Incorporation was acknowledged before me
this 03th day of May, 1995. by Alexis Acosta.

NOTARY PUBLIC
State of Florida at Large

My Commission Expires:

FILED
MAY - 4 1995
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICES OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST: THAT DESIGNER WOODWORKS, INC. DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH IT'S PRINCIPAL PLACE OF BUSINESS AT COUNTY OF DADE, STATE OF FLORIDA, HAS NAMED ALEXIS ACOSTA AT 1631 WEST 38TH PL. # 1506-A HIALEAH, FLORIDA 33012 AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE:



ALEXIS ACOSTA

TITLE: INCORPORATOR

DATE: MAY 03, 1995

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I
HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY
WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND
COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE:


ALEXIS ACOSTA

DATE: MAY 03, 1995

SECRET
MAY 11 1995
INTELLIGENCE DIVISION

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

APPROVED
AND
FILED

96 NOV 26 PM 1:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000034790

1. Corporation Name

DESIGNER WOODWORKS, INC.

Principal Place of Business

Mailing Address

3626 SW 112 Ave.
Miami, Fl. 33165

3626 SW 112 Ave.
Miami, Fl. 33165

2. Principal Place of Business

2a. Mailing Address

21 Suite Apt # etc

28 Suite Apt #, etc

22 City & State

27 City & State

23 Zip

26 Zip

24 Country

29 Country

3. Date Incorporated or Qualified

3a. Date of Last Report

05/04/95

4. FEI Number

65-0584996

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

7. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ALEXIS ACOSTA
3626 SW 112 Ave.
MIAMI, FL. 33165

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 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 of present or proposed registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY ST ZIP
PSD
Alexis Acosta
3626 SW 112 Ave.
Miami, Fl. 33165

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

600002017026--6

-12/02/96--01028--008

*****375.00 *****375.00

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY ST ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

600002017026--6

-12/02/96--01028--008

*****8.75 *****8.75

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY ST ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY ST ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

REINSTATEMENT 1996

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY ST ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY ST ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

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

SIGNATURE:

Alexis Acosta
President

11/05/96 (305) 885-4146

CR2E034 (12/95)