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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State -**DIVISION OF CORPORATIONS**

DOCUMENT # P95000065887 (8)

TCB FRAMING, INC.

Principal Place of Business

Mailing Address

FILED Feb 17 1998 8:00am Secretary of State



338 MALTA A	OAD 32828	338 MALTA BOAD ORLANDO XL 32828	Ţ		
	\			DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified 08/24/1995	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 7 2	5 Kayumd Dr	26 725 KC	Lywood	Dr. 59-3331882	Not Applicable
Silto Ant	#, etc.	Suite, Apt. #, etc.	/	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	indo, 7L	28 Orlando), TL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<u> </u>	25 ORAME	m 32825	30 00 mag	This corporation owes or has paid the current Personal Property Tax due June 30.	rrent year Intangible Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	Agent
	RT, CLAUDE		81 Name	Terry Letterma	N
938 OR	I MALTA ROAD LANDO, FL 32828		82 Street A	oddress (P.O Box Number is Not Acceptable)	Xr.
i 7	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		83	010-01-11 20	, O ~ E
			84 City	William do, FL Sa	85 Zip Code
			O4 City	FL	85 Zip Code
11. Pursuant office or t	to the provisions of Sections 607.0502 registered agent, or both, in the State of the artiliar with and acceptance obligations.	and 607.1508, Florida Statute f Florida. Such change was at ons of Section 607.0595. Flor	s, the above-named outhorized by the corporate Statutes.	corporation submits this statement for the purpose of coration's board of directors. I hereby accept the apply	of changing its registered pointment as registered
SIGNATURE	July Sotan	_ Kru	sident	2/12/	98
	Signature, typ glor printed name of registered agent	·	Registered Agent signature		D DIDECTORO III 10
12. TITLE	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	HART, CLAUDE		1,2 NAME	claude Hart	de change nasmon
STREET ADDRESS	828 MALTA ROAD	·	1.3 STREET ADDRESS	18415 Servinale, T	rais
CITY - ST - ZIP	ORLANDO FL-32028		1.4 CITY-ST-ZIP	Clermont 71.34	וזו
TITLE	₹P	DELETE	2.1 TITLE	President	Change Addition
NAME	LETTERMAN, JERRY		2.2 NAME	Terry Letterman	
STREET ADDRESS	725 HAYWOOD DR	•	2.3 STREET ADDRESS	725 Kaywood Dr.	
CITY-ST-7IP	ORLANDO FL 32825		2. 4 CITY- ST- ZIP	Orlando 7L 3282	25
TITLE	ST	DELETE	3 1 TITLE		Change Addition
NAME	WESTON, ROBERT		3.2 NAME	DK AS 15	
STREET ADDRESS	1700 JEANNETTE ST		3.3 STREET ADDRESS	UN 115 15	,
CITY-ST-ZIP	APOPKA FL 32712		3.4. CITY-ST-7IP		
TITLE		☐ DEFELE	4.1 TITLE		L Change L Addition
NAME			4. 2 NAME		ſ
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		Locusto	4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		L_ Change L_ Addition
NAME			5.2 NAME		ļ
STREET ADDRESS			5.3 STREET ADDRESS		İ
CITY-ST-ZIP	-	DELETE	5.4 CITY-ST-ZIP		Change Addition
TITLE		☐ DELEIL	6.1 TITLE		Change Addition
NAME OTDEET ADDRESS			6.2 NAME		,
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	certify that the information supplied with	this filing does not qualify for	6.4 CITY-\$1-ZIP the exemption stated	f in Section 119.07(3)(i), Florida Statutes. I further co	ertify 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 eath; 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					