

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000077386 (7)

1. Corporation Name

PRESTIGE FENCE & TRIM, INC.



Principal Place of Business

1746 NORTHWEST 38TH AVENUE
LAUDERMILL FL 33311

Mailing Address

1746 NORTHWEST 38TH AVENUE
LAUDERMILL FL 33311

3. Date Incorporated or Qualified
10/04/1995

3a. Date of Last Report
N/A

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
65-0644359

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

10. Name and Address of New Registered Agent

GROVES, CHARLES H
12550 BISCAYNE BOULEVARD
SUITE 303
NORTH MIAMI BEACH FL 33181

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, typed or printed name of registered agent, if applicable

Signature, Registered Agent's signature required when registering

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME WORRELL, DENNIS
STREET ADDRESS 3266 NORTHWEST 123RD AVENUE
CITY-ST-ZIP SUNRISE FL 33323 ☐ DELETE

1. TITLE PD
12 NAME WORRELL, DENNIS
13 STREET ADDRESS 1194 NORTHWEST 40TH AVENUE APT. 319
14 CITY-ST-ZIP LAUDERMILL, FLORIDA, 33313 ☐ Change ☐ Addition

TITLE STD
NAME WORRELL, LUZVIMINDA
STREET ADDRESS 3266 NORTHWEST 123RD AVENUE
CITY-ST-ZIP SUNRISE FL 33323 ☐ DELETE

2. TITLE STD
22 NAME WORRELL, LUZVIMINDA
23 STREET ADDRESS 1194 NORTHWEST 40TH AVENUE APT. 319
24 CITY-ST-ZIP LAUDERMILL, FLORIDA, 33313 ☐ Change ☐ Addition

TITLE D
NAME KING, KEITH R
STREET ADDRESS 85 HESLIP TERRACE
CITY-ST-ZIP SCARBOROUGH, ONTARIO MITIWS ☐ DELETE

3. TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

4. TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

5. TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

6. TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP ☐ Change ☐ Addition

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: Luzviminda Worrell (STD) 04-25-96 954-5879926
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)