SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

appears in Block 12 or Block 13 if changed, or on an attachment with an address. SHOW WE IN

**PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham FILED ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS AUG 18 PM 1: 14 POCUMENT # P95000082338 (1) SECRETARY OF STATE ATTASSEE, FLORIDA CABINET WORKS BY RIGO, INC. Principal Place of Business Mailing Address 814-107 AVE N 814-107 AVE N NAPLES FL 33963 NAPLES FL 33936 DO NOT WRITE IN THIS SPACE US US 3. Date Incorporated or Qualified 3a. Date of Last Report 10/23/1995 03/26/1996 FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 21 65-0311147 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zφ Country 8. This corporation owes or has paid the curre ht year Intangible Yes □ No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MARTIN, RIGOBERTO 814 107TH AVENUE N. 82 Street Address (P.O. Box Number is Not Acceptable) NAPLES FL 33963 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. (4/97 🔲 DELETE 1.1 TITLE Change Addition TITLE MARTIN, RIGOBERTO NAME 1.2 NAME 70000227<u>1</u> -1<u>8</u>/0/00 814 107TH AVENUE N. 1.3 STREET ADDRESS STREET ADDRESS NAPLES FL 33963 1.4 CITY - ST - ZIP CITY-ST-ZIP \*\*\*\*165.00 DELETE 2.1 TOLE TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - S1 - ZIP ULE DELETE 4.1 TITLE Change Addition NIME 4. 2 NAME REFT ADDRESS 4.3 STREET ADDRESS CITY-SY-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 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 does not qualify for the exemption stated in Section 119.07(3)(i), 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 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

SEE HUBBLD

CABINET WOOKS by Rigo

· Deparment of State

Aug 12,97

I BID not Receive Alta Jinst Notice, This is the first time it has come to my Afficient Thank you figure + Cllack

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