

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Feb 05 1997 8:00am
Secretary of State

DOCUMENT # P96000004025
1. Corporation Name

J & S CARPENTRY CORPORATION

Principal Place of Business Mailing Address
891 SW 69TH AVENUE
MIAMI, FLORIDA 33144

3. Date Incorporated or Qualified 01-09-96 3a. Date of Last Report N/A

2. Principal Place of Business 2a. Mailing Address
21 891 SW 69TH AVENUE 26 C/O 7098 BONITA DRIVE

4. FEI Number 65-0640498 Applied For Not Applicable

Suite, Apt. #, etc. Suite, Apt. #, etc.

5. Certificate of Status Desired \$8.75 Additional Fee Required

22 City & State 27 City & State
23 MIAMI, FL 33144 28 MIAMI BEACH, FL

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

24 Zip 33144 25 Country DADE 29 Zip 33141 30 Country DADE

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

JOSE LUIS GONZALEZ
6847 SW 12 STREET
MIAMI, FLORIDA 33144

81 Name SERGIO VALDEZ
82 Street Address (P.O. Box Number is Not Acceptable)
10521 S.W. 47TH STREET
83
84 City MIAMI FL 85 Zip Code 33165

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]* 11-08-96 DATE

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

12. OFFICERS AND DIRECTORS
TITLE PD DELETE
NAME JOSE LUIS GONZALEZ
STREET ADDRESS 6847 SW 12TH STREET
CITY-ST-ZIP MIAMI, FLORIDA 33144
TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE PD Change Addition
1.2 NAME SERGIO VALDEZ
1.3 STREET ADDRESS 10521 S.W. 47TH STREET
1.4 CITY-ST-ZIP MIAMI, FLORIDA 33165
2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-08-96 Date

(305) 868-5365 Daytime Phone #

CR2E034 (3/96)