## 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.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000026676 (2)

1. Corporation Name
CINCERPREAD TRIM COMPANY OF PARASOTA INC.

## FILED Jul 22 1997 8:00am Secretary of State

GINGERBREAD TRIM COMPANY OF SARASOTA, INC. Principal Place of Business Mailing Address 23058 HARBOR VIEW RD 23058 HARBOR VIEW RD CHARLOTTE HARBOR FL 33980 CHARLOTTE HARBOR FL 33980 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 03/21/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 60 BOX 981013 21 650673986 Not Applicable Suite, Apt. #. etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required UNIT G 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing MURDOCK 23 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 33938-1013 Yes Personal Property Tax due June 30. 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MACHNIK, JOSEPH Namo 23058 HARBOR VIEW RD 82 Street Address (P.O. Box Number is Not Acceptable) **CHARLOTTE HARBOR FL 33980** 83 84 City 85 Zip Code FL 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 (NOT): Hog stored Agent signature required when reinstating) Signature, typod or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. (4/97) Addition ☐ DELETE Change TITLE 1.11014 MACHNIK, JOSEPH 12 NAME NAME 23058 HARBOR VIEW RD STREET ADDRESS 1.3 STREET ADDRESS **CHARLOTTE HARBOR FL 33980** CITY-ST-ZIP 1.4 CHY+ST-7/F DETELL Change Addition 2.1 TITLE TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-S1-ZiP DELETE Change Addition TITLE 3.1 11116 NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4.0(1Y+S1-2(P CITY-ST-ZIP DELETE Change Addition 5.1 HHE TITLE NAME 5.2 NAMI STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY- \$1 - ZIE CITY-ST-ZIP DETETE Change Addition THILE 61 TITLE NAME 6.2 NAME **6.3 STREET ADDRESS** STREET ADDRESS CITY-ST-ZIP 6.4 CHY+ST-ZIP

14. I do hereby certify that the information supplied with this bling 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 offect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted employeered 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 attraction of the corporation of the receiver or trusted employeered to execute this report as required by Chapter 607, Florida Statutes; and that my name

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7-18-07

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