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

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State*
DIVISION OF CORPORATIONS

FILED Aug 05 1997 8:00am Secretary of State

DOCUMENT # P9600035028 (5) 1. Corporation Name ALEX & BOB CARPENTRY CORPORATION					
Principal Place of Business Mailing Address					
3231 NORTHWEST 12TH PLACE 3231 NORTHWEST 12TH PL FT. LAUDERDALE FL 33311 FT. LAUDERDALE FL 33311					
			• •		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified 3a. Date of Last Report 04/19/1996
2. Principal Place of Business 2a. Mailing Address					4. FEI Number 65-0660416 Applied For
21 26					Not Applicable
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc. 27				5. Certificate of Status Desired \$8.75 Additional Fee Regulred
City & State City & State					6. Election Campaign Financing \$5.00 May Be
23	28				Trust Fund Contribution
Zip	Country 25	Zip	Zip Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24	9. Name and Address of Current		[30]		10. Name and Address of New Registered Agent
GIB	BONS, ALEX		81	Name	
3231 NORTHWEST 12TH PLACE			82	Street A	address (P.O. Box Number is Not Acceptable)
FT.	LAUDERDALE FL 33311		83		
			L.		
[4			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 eigent, or both. In the State of Florida. Such change was authorized by the corporation's board of directors. I heroby accept the appointment as registered agent. I am familiar with, and a cept the obligations of Section 607.0505, Florida Statutes.					
SIGNATURE	Aller I	3 - Mon	-		7/16/95
12.	Signature, typod of printed name of registered agent OFFICERS AND		Registered Ag	ent signature r	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	PD DELETE			Change Addition
NAME	GIBBONS, ALEX		1.2 NAME	-	
STREET ADDRESS	3231 NORTHWEST 12TH PLACE		1.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL 33311 VD DELETE		1.4 CITY - 5 2.1 TITLE	ST-ZIP	Change Addition
TITLE NAME	INGRAM, ROBERT			ı	Change L. Availabil
STREET ADDRESS	1801 N.W. 7TH PLACE			F ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33311		2. 4 CITY-ST-ZIP		
TITLE	_ 	DELETE 3.1			☐ Change ☐ Addition
NAME STREET ANNAGESS			3.2 NAME	T ADDRESS	
STREET ADORESS CITY-ST-ZIP			3.4. CITY-	- 1	
TITLE		☐ DELETE	4.1 TITLE	1	Change Addition
NAME			4. 2 NAME		
STREET ADDRESS	:		4.3 STREET	F ADDRESS	
CITY-ST-ZIP				ST-ZIP	Change Addition
TITLE NAME	- ·		5.1 TITLE 5.2 NAME		C Ononge C Addition
STREET ADDRESS				ADDRESS	
CITY-ST-ZIP			5.4 CITY-5		
TITLE	74	DELETE	6.1 TITLE		Change Addition
NAME	<u> </u>		62 NAME	ļ	
STREET ADDRESS	•		6.3 STREET		
CITY-ST-ZIP	ov cortifu that the information supplied	with this filing done not qualit	6.4 CITY-5		etad in Section 110 07/(2)(i) Florida Statutas I further cartify that the

I. 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 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 of on an attachment with all address.