FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000046427

FUTURE	FRAMING INC.	pt.			- -	<u> </u>	
				 .			
Principal Place of Business Mailing Address							
4421 NW 6TH COURT COCONUT CREEK FL 33066 US 4421 NW 6TH COURT COCONUT CREEK FL 33066 US					DO NOT WRITE IN TH	IS SPACE	
					3. Date Incorporated or Qualifed		
					05/31/1996		}
Principal Place of Business 2a. Mailing Address					4. FEI Number	Apr	plied For
26					65-0670309 Not Applic		t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 A	dditional
27					5. Certificate of Status Desired	Fee Rec	quired
City & State	9	City & State			6. Election Campaign Financing	\$5.00	May Be
23	·	28			Trust Fund Contribution	Added to	o Fees
Zip	Country	Zíp	Countr	y	8. This corporation owes the current year		
24	25	29	30		Personal Property Tax.		□No
	9. Name and Address of Curre	nt Registered Agent		41	10. Name and Address of New Registere	d Agent	
MAD	CALL DICUADO		8	1 Name			
NADEAU, RICHARD 4421 NW 6TH COURT			8:	2 Street Addr	ess (P.O. Box Number is Not Acceptable)		
COCONUT CREEK FL 33066					<u> </u>		
000	ONUT CHEEK FL 33000		8:	3			
			8	4 City		85 Zip C	Code
<u></u>					oration submits this statement for the purpose	L	
agent. I a SIGNATURE	m familiar with, and accept the oblig			ent signature required	on's board of directors. I hereby accept the applications to the control of directors of the control of the con		
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	P ·	☐ DELETE	1.1 TITLE			Change	☐ Addition
NAME	NADEAU, RICHRD		1.2 NAME	·			
STREET ADDRESS	4421 NW 6TH COURT		1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	COCONUT CREEK FL		1.4 CITY-				- Addision
TITLE		☐ DELETE	2,1 TITLE			Change	Addition
NAME	•		2.2 NAME	·			
STREET ADDRESS			2.3 STRE	ET ADDRESS			}
CITY-ST-ZIP	<u> </u>		2.4 CITY		<u> </u>	[] Change	Addition
TITLE		☐ DELETE	3.1 TITLE			□1 cuanta	
NAME			3.2 NAME				1
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		DELETE	3,4, CITY			□ Change	Addition
TITLE		☐ NETELE	4.1 TITLE			LJ Silange	ا ۱۰۰۰،۰۰۰ ری
NAME			4. 2 NAM				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		DELETE	4.4 CITY-	~ _		[] Change	☐ Addition
TITLE	· .	LLI DECETE	5.2 NAME	!			
NAME				ET ADDRESS			
STREET ADDRESS			5.4 CITY-				
CITY-ST-ZIP	<u> </u>	☐ DELETE	6.1 TITLE			[] Change	Addition
NAME		_ =======	6.2 NAME		•	_ •	_
INAME			_				

14. I 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, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90057 048 ***150.00