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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P96000046469 (8)

FILED Aug 05 1998 8:00am Secretary of State

Principal Place	'S FURNITURE CUSTOM e of Business	FINISHING, INC. Mailing Address			
12501 NE 13TH AVE #314 NORTH MIAMI FL 33161		12501 NE 13TH AVE #314 NORTH MIAMI FL 33161		DO NOT WRITE IN THI	S SPACE
				3. Date Incorporated or Qualified	3 3 NOL
				05/24/1996	
2. Principal P	lace of Business	28. Mailing Address		4. FEI Number	Applied For
า		26		65-0680384	Not Applicable
Suite, Apt.	#. etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be
3		28		Trust Fund Contribution	Added to Fees
Zip	Country	Ζφ	Country	8. This corporation owes or has paid the o	
4	25	29	30	Personal Property Tax due June 30.	Yes No
	Name and Address of Curr	rent Registered Agent		10. Name and Address of New Registere	d Agent
GO	PRDON, LLOYD B		81 Name		
125	501 NE 13TH AVE #314		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
NO	RTH MAMI FL 33161				
			B3		
			84 City		■ 85 Zip Code
				rporation submits this statement for the purpose	
agent. Fa	m familiar with, and accept the ob	digations of, Section 607.0505,	s authorized by the corpora Florida Statutes.	ation's board of directors. I hereby accept the a	ppointment as registered
agent. Fa BIGNATURE	Signature, typical or printed name of registerial OFFICERS A	ligations of, Section 607.0505, ligent and title of applicable (N AND DIRECTORS	Florida Statutes. OIE Rogistered Agent signature req. 13.	ation's board of directors. I hereby accept the a	ppointment as registered ND DIRECTORS IN 12
agent. Fa	Signature, typed or punited name of required OFFICERS /	digations of, Section 607.0505,	OTE Hog stered Agent signature req. 13. 1.1 TILE	ation's board of directors. Thereby accept the a	ppointment as registered ND DIRECTORS IN 12
agent. a SIGNATURE IZ. ITLE	Signature, typical or pointed manic of requestered OFFICERS A DPST GORDON, LLOYD B	ligations of, Section 607.0505, spent and tell-of applicable (N AND DIRECTORS DELETE	CITE Registered Agent signature req. 13. 1.1 TILE 1.2 NAME	ation's board of directors. Thereby accept the a	ppointment as registered ND DIRECTORS IN 12
agent. a SIGNATURE 12. 1TLE IAME STREET ADDRESS	Signature types or punited name of requirems OFFICERS / DPST GORDON, LLOYD B 12501 NE 13TH AVE #314	ligations of, Section 607.0505, spent and tell-of applicable (N AND DIRECTORS DELETE	CITE Registered Agont signature req. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ation's board of directors. Thereby accept the a	ppointment as registered ND DIRECTORS IN 12
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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 supplicational 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 pranged, or in an attaching twith an address.

SIGNATURE (

By LLOUDE GOLDON

06.2698 3058930408