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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P96000047542 (1)

FONTANA WOODWORKS, INC.

Principal Place of Business Mailing Address  3263 SW 14TH PLACE 3263 SW 14TH PLACE BOYNTON BEACH FL 33426 BOYNTON BEACH FL 3342														
"	UINION BEA	non fe some	0	60 H	TION DENON TE 35%	20-9000			-	3. Date Incorporated or Qualified 05/30/1996	3a, I	Date of Last R	eport	7
Principal Place of Business     2					2a. Mailing Address					4. FEI Number		₽ Ar	plied For	7
21				26	·							No	ot Applicable	
22	Suite, Apt #, etc				Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75 / Fee Re		
-	City & State	e	· <del>-</del>		City & State					6. Election Campaign Financing		\$5.00		7
23				28	28				ĺ	Trust Fund Contribution		Added		
1	Zip		Country	Z	ip	Count	try			8. This corporation has liability for	r intangib	le tax under s	. 199.032,*	٦
24				30					Florida Statutes					
<del> </del>			and Address of	Current Register	red Agent		aT.			O. Name and Address of New F	egistere	d Agent		4
Į		ntana, sa				l°	11	Name	t					
3263 SW 14TH PLACE BOYNTON BEACH FL 33426						8	2	Street /	Address	(P.O. Box Number is Not Accept	able)			7
	50					8	13							٦
						8	14	City	, <del></del>		F	<b>85</b> Zip	Code	$\dashv$
11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes								-named	1 corporal	tion submits this statement for the	DUIDORA	of changing it	s registered	$\dashv$
Ι΄	office or r	registered at	gent, or both, in th	e State of Florida.	Such change was a	authorized	by	the corp	rporation's	s board of directors. I hereby acc	ept the ap	ppointment as	registered	
١.				e obligations or, s	ection buz.voub, nic 	orioa Statu	ies	i. —4				1:29.9		1
\$	IGNATURE	No No	for pointed frame of regis	lered agent and tillo it a	pplicable (NOT	E Registered A	Ager	nt signature	re required w	hen reinstating)	DATE	101.1		İ
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14. 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, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SAM FON FANA V 1.29.97

561-364-8075

regulate rations in

**FILED** 

Feb 10 1997 8:00am

Secretary of State