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

PROFIT CORPORATION **ANNUAL REPORT**

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000073604 (6)

T & T FINE CUSTOM FRAMING, INC.

Principal Place of Business

2151 LE JEHNE RO

2151 LE JEUNE RD

FILED Apr 24 1998 8:00am Secretary of State



MEZZANINE	MEZZANINE			DO NOT WRITE IN THIS SPACE			
CORAL GABLES FL 33134							
				3. Date Incorporated or Qualified			
2. Principal Place of Business	2a. Mailing Address			09/03/1996 4. FEI Number		Applied For	
21 BLOG 137 OPA-LOCKA AIRPORT		+ Al	25	65-0701614		Not Applicable	
Suite, Apl. #, etc.	Suite, Apt. #, etc.				\$8.7	5 Additional	
22	27 8/4 City & State			5. Certificate of Status Desired		Pequired	
City & State	City & State	ر سو		6. Election Campaign Financing	\$5.	00 May Be	
23 OPA LOCKA, FL	28 M/AM1,	1. 20		Trust Fund Contribution		led to Fees	
Zip Country 24 33 0 5 4 25 U 5 A	Zip	Country	54	8. This corporation owes or has paid the cu			
24 33 0 5 4 25 USH g. Name and Address of Currer	29 33/3 7 30 of Registered Agent	1 0.	3/+	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes Agent	☐ No	
WILSON, J. EVERETT	H TOSISSION ASSAUL	81	Name		Agoin		
2151 LE JEUNE RD							
MEZZANINE		82	Street	Address (P.O. Box Number is Not Acceptable)		İ	
CORAL GABLES FL 33134		83	-				
COTOR COLLEGE COSTOR			0.11		71		
		84	City	FL	85 2	Zip Code	
11. Pursuant to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes,	the above	e-named	d corporation submits this statement for the purpose of	f changir	ng its registered	
 office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig. 	⊦of Florida. Such change was auth ations of, Section 607,0505, Florid;	norized by a Statutes	the corp 3.	poration's board of directors. I hereby accept the app	ointment	t as registered	
SIGNATURE							
Signature, typed or printed name of registered age		gistered Age	nt signature	e required when reinstating) DATE			
12. OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS ANI			
TITLE D	🔀 DELETE	1.1 TITLE		PRESIDENT	Chan	ge 🔲 Addition	
NAME WILSON, J. EVERETT		1.2 NAME		REX THOMPSON 3301 NE 5th AUE #814			
STREET ADDRESS 2151 LE JEUNE RD		1.3 STREET		MIAMI, FL 33/37			
CITY-ST-ZIP CORAL GABLES FL 33134	DELETE	1.4 CITY-S	T-ZIP	MANI / 72 33/3/	Chan	ge Addition	
1		21 TITLE		ļ	L Cilan	ge 🗀 Audition	
NAME STREET ADDRESS		2.2 NAME 2.3 STREET	4000000				
CITY-ST-ZIP		2.3 STREET		,		[
TITLE	DELETE	3.1 TITLE	SI-ZIP		☐ Chan	ge Addition	
NAME	·	3.2 NAME					
STREET ADDRESS		3.3 STREET	ADDRESS	ĺ			
CITY-ST-ZIP		3.4. C(TY - S				j	
TITLE	DELFTE	4.1 TOTLE			Chan	ge Addition	
NAME		4. 2 NAME		1			
STREET ADDRESS		4.3 STREET	ADDRESS			1	
CITY-ST-ZIP		4.4 CITY-S	F- Z IP			-	
TITLE	DELETE	5.1 TITLE			Chan	ge Addition	
NAME		5.2 NAME	:				
STREET ADDRESS	_	5.3 STREET	ADDRESS)		Ì	
CITY-S1-ZIP	- <u></u>	5.4 CITY S	T-ZIP				
TITLE	☐ DELETE	6.1 TITLE			Chan	ge 🔲 Addition	
NAME	1	6.2 NAME	,			j	
STREET ADDRESS	ł	6.3 STREET	ADDRESS			1	
CITY-ST-ZIP		6.4 CITY - ST	T-ZIP				

thereby 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 suppliemental 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 trustoe 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.