

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Jul 27, 1999 8:00 am**  
**Secretary of State**

07-27-1999 90027 045 \*\*\*150.00

DOCUMENT # **P96000081011**

1. Corporation Name  
**AMERICAN TRIM, INC.**



Principal Place of Business

**4165-H NW 132 STREET  
MIAMI FL 33054  
US**

Mailing Address

**4165-H NW 132 STREET  
MIAMI FL 33054  
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**09/27/1996**

4. FEI Number

**65-0698162**

Applied For  
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation owes the current year  
Intangible Personal Property.

☐ Yes ☒ No

2. Principal Place of Business

**21 4165 N.W. 132 Street**

2a. Mailing Address

**26 4165 N.W. 132 Street**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**23 Miami, FL**

City & State

**28 Miami, FL**

Zip

**24 33054**

Country

**25 US**

Zip

**29 33054**

Country

**30 US**

9. Name and Address of Current Registered Agent

**MARTIN, DARIENS  
6988 W 17 COURT  
HIALEAH FL 33014**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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 office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE  
NAME **MARTIN, DARIENS**  
STREET ADDRESS **6988 W 17 COURT**  
CITY-ST-ZIP **HIALEAH FL 33014**

TITLE **D** ☐ DELETE  
NAME **MARTIN, LARITZA**  
STREET ADDRESS **6988 W 17 COURT**  
CITY-ST-ZIP **HIALEAH FL 33014**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D** ☒ Change ☐ Addition  
1.2 NAME **Martin, Dariens**  
1.3 STREET ADDRESS **8355 N.W. 161 Terrace**  
1.4 CITY-ST-ZIP **Miami Lakes, FL 33016**

2.1 TITLE **D** ☒ Change ☐ Addition  
2.2 NAME **Martin, Laritza**  
2.3 STREET ADDRESS **8355 N.W. 161 Terrace**  
2.4 CITY-ST-ZIP **Miami Lakes, FL 33016**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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.

SIGNATURE:

**Laritza Martin**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**7/23/99 (305) 688-0308**  
Daytime Phone #

CR2E034 (5/99)

P96000081011  
596708-90027-45

**AMERICAN TRIM, INC.**  
**4166 N.W. 132nd Street**  
**Miami, FL 33054**  
**Ph: (305) 688-0308**  
**Fax: (305) 688-9770**

July 23, 1999

Department of State  
Division of Corporations  
Annual Reports Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: Document # P96000081011

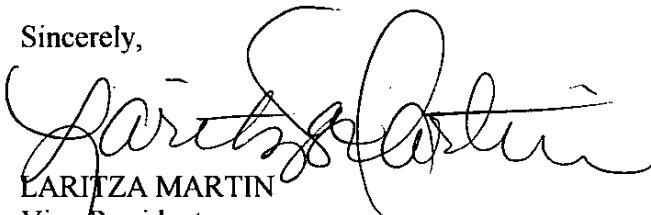
Dear Sir or Madam:

This letter is to inform you that I am sending you check no. 3564 for \$150.00 with the second notice due to we never received the first one. I think the reason was that since we moved over a year ago the first notice was sent to our previous address.

As you noticed is the first time that we have been late.

Please excuse us.

Sincerely,

  
LARITZA MARTIN  
Vice President