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).

2a, Mailing Address

City & State

Zip

Suite, Apt, #, etc.

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PROFIT CORPORATION ANNUAL REPORT

1999

Principal Place of Business

4061 ROYAL PALM BEACH BLVD.

ROYAL PALM BEACH FL 33411

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

23

24

Zip



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000006966

Country

9. Name and Address of Current Registered Agent

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4061 ROYAL PALM BEACH BLVD. **ROYAL PALM BEACH FL 33411**

GEORGE, JOHN P

MAJESTIC INTERIOR TRIM, INC.

Mailing Address 4061 ROYAL PALM BEACH BLVD. ROYAL PALM BEACH FL 33411

Country

81 Name

82

83 84 City

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	DO NOT WRITE IN THIS SPACE
	3. Date Incorporated or Qualified 01/17/1997
	4. FEI Number Applied For 65-0723126 Not Applicable
<u></u>	5. Certificate of Status Desired \$8.75 Additional Fee Required
	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution
	8. This corporation owes the current year Intangible Personal Property. Yes No
Name	10. Name and Address of New Registered Agent
Street	Address (P.O. Box Number is Not Acceptable)
City	FL 85 Zip Code
amed c he corp	orporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
ent signatu	re required when reinstating) DATE
	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
i	L_ Change L_ Addition
Doress IP	
	☐ Change ☐ Addition
DORESS	
ZIP	Change Addition
DDRESS	
IP.	
	l I I I I I

FILED

Sep 22, 1999 8:00 am Secretary of State

09-22-1999 90012 029 ***550.00

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corpora office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation 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 requi OFFICERS AND DIRECTORS 13. 12. 1.1 TITLE D TITLE DELETE GEORGE, JOHN P 1.2 NAME NAME 4061 ROYAL PALM BEACH BLVD 1.3 STREET ADDRESS STREET ADDRESS ROYAL PALM BEACH FL 33411 1.4 CITY-ST-ZIP CITY-\$T-ZIP 2.1 TITLE TITLE ___ DELETE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP 3.1 TITLE __ DELETE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP 4.1 TITLE TITLE DELETE __ Change ___ Addition 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP 5.1 TITLE Change Addition TITLE DELETE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE DELETE __ Change Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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: ,

561-793-2361