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FILED  
Mar 26 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000010584 (5)

1. Corporation Name

CUSTOM CABINET CRAFTERS, INC.

Principal Place of Business

3909 WEST LAKE  
SEFFNER FL 33584

Mailing Address

3909 WEST LAKE  
SEFFNER FL 33584

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/30/1997

4. FEI Number

59-3431688

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 or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 7005 E 14TH AVE

Suite, Apt. #, etc.

22

City & State

23 TAMPA FL

Zip

24 33619

Country

25 HILLSB

2a. Mailing Address

26 7005 E 14TH AVE

Suite, Apt. #, etc.

27

City & State

28 TAMPA FL

Zip

29 33619

Country

30 HILLSB

9. Name and Address of Current Registered Agent

FLETCHER, MARK  
3909 WEST LAKE  
SEFFNER FL 33584

81 Name

MARK FLETCHER

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

5411 S. JELLAS ST

83

84 City

TAMPA

FL

85 Zip Code

33619

10. Name and Address of New Registered Agent

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

Mark Fletcher President

(NOTE: Registered Agent signature required when reinstating)

3-18-98

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME FLETCHER, MARK  
STREET ADDRESS 3909 WEST LAKE  
CITY-ST-ZIP SEFFNER FL 33584

TITLE D ☐ DELETE

NAME GODIN, NORMAN  
STREET ADDRESS 3909 WEST LAKE  
CITY-ST-ZIP SEFFNER FL 33584

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 ☒ Change ☐ Addition

1.2 NAME President  
Mark Fletcher  
1.3 STREET ADDRESS 5411 S Jellas St  
1.4 CITY-ST-ZIP Tampa FL 33611

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME Vice President  
Norman Godin  
2.3 STREET ADDRESS 3909 West Lake  
2.4 CITY-ST-ZIP Seffner FL 33584

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 in an attachment with an address.

SIGNATURE:

Mark Fletcher

3-18-98 (813) 246-9188

CR2E034 (10/97)