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-	ROFIT PORATION		\	TMENT OF STATE	May 04	1998 8:	00a
ANNU/	AL REPOR	T NEW Y		y of State	-	tary of S	
1998 Division of corporations						lary or S	lait
		P97000	069230 (5))			
S & S	TRIM, INC.						
Principal Place of Business Mailing Address							
10535 NW 37TH STREET 10535 NW 37TH STREET CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065							
					DO NOT W 3. Date Incorporated or Qualif	RITE IN THIS SPACE	
					08/11/1997		
2. Principal Pla	NW 37 57	.el	2a. Mailing Address 26 105 35 NW	37 5+	4. FEI Númbér 65-077402		pplied For lot Applicabl
Suite, Apt. #	elc.		Suite, Apt. #, etc.	319.	5. Certificate of Status Desired	\$8.75	Additional
2 City & State			27 City & State		6. Election Campaign Financir	F68 H	May Be
Goral	Spring	s F I	28 Coral Spr	ngs Fl	Trust Fund Contribution	DebbA 🗌	to Fees
Zip 3306	5 25	,	Zip 20 33065	30 USA	 This corporation owes or hat Personal Property Tax due. 	June 30. 🛛 Yes 【	No
	9. Name and	Address of Current Re		81 Name	10. Name and Address of Nev	v Registered Agent	
	AUT, MINDY AR-A NORTH	r University Drive			dress (P.O. Box Number is Not Acce		
	ANTATION FL				Idress (F.O. Box Multiper is Not Acce		
				83			
				84 City			Code
11. Pursuant to office or reg	the provisions	of Sections 607 0502 ar	d 607.1508, Florida Statute Iorida, Such change was a	84 City	provide the statement for a statement for a statement for a statement of directors. I hereby a		
	the provisions gistered agent, familiar with, a	of Sections 607 0502 ar or both, in the State of F nd accept the obligatior	id 607.1508, Florida Statute Iorida. Such change was a Is of. Section 607.0505, Flo	84 City	provention submits this statement for ration's board of directors. I hereby a		
		nled name of registered agent are	d title if applicable (NOTE	84 City ss, the above-named co uthorized by the corpor rida Statutes.	quired when reinstating)	PL	its registere s registered
SIGNATURE			d title if applicable (NOTE	84 City ss, the above-named co uthorized by the corpor rida Statutes.		PL	its registere s registered RS IN 12
SIGNATURE	lgnature, typed or pri	nled name of registered agent as OFFICERS AND DI	d Inle if applicable (NOTE RECTORS	84 City ss, the above-named co uthorized by the corpor rida Statutes. Registered Agent signature req 13.	quired when reinstating)	DATE	its registere s registered RS IN 12
SIGNATURE	D RIEDEL, S 10535 NW	Ned hand of reported agent and OFFICE HS AND DI NEVEN A 1 37TH STREET	d Inle if applicable (NOTE RECTORS	84 City ss, the above-named couthorized by the corporrida Statutes.	quired when reinstating)	DATE	its registere s registered RS IN 12
SIGNATURE SI	D RIEDEL, S 10535 NW	Died name of registered agent av OFFICE HS AND DI	d Inle if applicable (NOTE RECTORS	84 City Ss, the above-named co uthorized by the corpor rida Statutes. Registered Agent signature req 13. 1.1 TITLE 1.2 NAME	quired when reinstating)	DATE	its registered s registered RS IN 12
SIGNATURE SI 12. TITLE NAME STREET ADORESS CITY-ST-ZIP	D RIEDEL, S 10535 NW CORAL SF D MCKAY, S	Ned hand of registered agent av OFFICE RS AND DI TEVEN A / 37TH STREET PRINGS FL 33065 SUSAN	d inte if applicable (NOTE RECTORS	84 City ss, the above-named couthorized by the corporrida Statutes.	quired when reinstating)	DATE	its registered s registered RS IN 12
SIGNATURE SI 12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS	D RIEDEL, S 10535 NW CORAL SF D MCKAY, S 3233 NE 1	Ned hand of registered agent av OFFICE HS AND DI NEVEN A / 37TH STREET PRINGS FL 33065 SUSAN 10TH STREET, #207	d inte if applicable (NOTE RECTORS	84 City 35, the above-named couthorized by the corporrida Statutes. City Registered Agent signature reg 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 3.5 STREET ADDRESS	quired when reinstating)	DATE	its registered s registered RS IN 12
SIGNATURE SI 12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP	D RIEDEL, S 10535 NW CORAL SF D MCKAY, S 3233 NE 1	Ned hand of registered agent av OFFICE RS AND DI TEVEN A / 37TH STREET PRINGS FL 33065 SUSAN	d inte if applicable (NOTE RECTORS	84 City 35, the above-named couthorized by the corporrida Statutes. City Registered Agent signature reg 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	quired when reinstating)	DATE	its registered s registered RS IN 12 Additio
SIGNATURE SI 12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS	D RIEDEL, S 10535 NW CORAL SF D MCKAY, S 3233 NE 1	Ned hand of registered agent av OFFICE HS AND DI NEVEN A / 37TH STREET PRINGS FL 33065 SUSAN 10TH STREET, #207	d Infe if applicable (NOTE RECTORS	84 City 35, the above-named couthorized by the corporrida Statutes. City Registered Agent signature reg 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.3 STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	quired when reinstating)	EL	its registered s registered RS IN 12 Additio
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