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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000094599 (2)

Country

9. Name and Address of Current Registered Agent

25

DEERFIELD BEACH FL 33442

BAILEY, HARRY 268 NW 40TH TERRACE

ULTIMATE CARPENTRY, INC.

Principal	Place	of	Business

Mailing Address

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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268 NW 40TH TERRACE **DEERFIELD BEACH FL 33442**

2. Principal Place of Business

Sulte, Apt. #, etc.

City & State

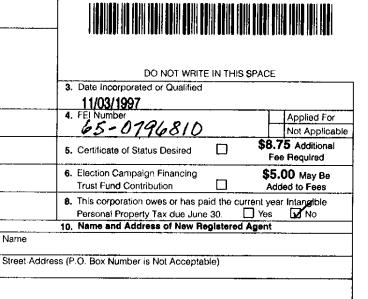
23

24

Zip

268 NW 40TH TERRACE DEERFIELD BEACH FL 33442

FILED Apr 28 1998 8:00am Secretary of State



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, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN #2 D-DIRECTOR FRANK BAILEY TITLE DPT DELETE 1.1 TITLE Change **✓** Addition NAME BAILEY, HARRY 1.2 NAME 268 NW YOTH TERRACE 268 NW 40TH TERRACE STREET ADDRESS 1.3 STREET ADDRESS DEERFIELD BEACH, FL. 33442 **DEERFIELD BEACH FL 33442** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 THUE ■ Addition CASSESE, PHILIP W NAME 2.2 NAME STREET ADDRESS 3982 NW 1 PLACE 2.3 STREET ADDRESS CITY-ST-ZIP **DEERFIELD BEACH FL 33442** 2.4 CITY-ST-ZIP TITLE DELET€ 3.1 TITLE Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE Change ☐ Addition NAME 4.2 NAME STREET ADDRESS 43 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE Change 5.1 TITLE ■ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

Country

81 Name

62

63 84 City

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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 production with an address.