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**PROFIT** CORPORATION ANNUAL REPORT

1999

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DOCUMENT # P97000101587

FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State

DIVISION OF CORPORATIONS

## FILED Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90116 033 \*\*\*150.00

& M WOODWORK, INC.	The same year	1 4

Mailing Address Principal Place of Business 4936 NORTHWEST 47TH AVENUE 4936 NORTHWEST 47TH AVENUE **COCONUT CREEK FL 33073** COCONUT CREEK FL 33073 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed 12/03/1997 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 65-0798820 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 28 8. This corporation owes the current year Intangible Country Country Zip Zip 30 Personal Property Tax. 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent FERREIRA, ARY Street Address (P.O. Box Number is Not Acceptable) 82 4936 NW 47TH AVE **COCONUT CREEK FL 33073** 83 Zip Code 84 85 City FI 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 ☐ Addition ☐ DELETE 11 DTLE TITLE FERREIRA, ARY 1.2 NAME NAME 4936 NORTHWEST 47TH AVENUE 1.3 STREET ADDRESS STREET ADDRESS **COCONUT CREEK FL 33073** 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change DELETE 2.1 TITLE TITLE BACELAR, MARCOS A 2.2 NAME NAME 4936 NORTHWEST 47TH AVENUE 2.3 STREET ADORESS STREET ADDRESS **COCONUT CREEK FL 33073** 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE 3.1 TITLE TITLE

32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition □ DELETE 5.1 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 6.1 TITLE Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 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, with all other like empowered.

NINGOFFICER OR DIRECTOR President 1-25-99 954-520-6714

Dato Daytime Phone #

CR2E034 (11/98)