

2004 FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2004 8:00 am
Secretary of State

02-05-2004 90012 034 ***150.00

DOCUMENT # P97000106221

1. Entity Name
UNLIMITED WOODWORKS, INC.



Principal Place of Business
41 S.E. 9TH STREET
BOY 6N
DEERFIELD BEACH, FL 33441 US

Mailing Address
41 S.E. 9TH STREET
BOY 6N
DEERFIELD BEACH, FL 33441 US



2. Principal Place of Business
41 SE 9th Street

3. Mailing Address
41 SE 9th Street

Suite, Apt. #, etc.
Boy 6N

Suite, Apt. #, etc.
Boy 6N

City & State
Deerfield Beach

City & State
Deerfield Beach

Zip
33441

Country
Broward

Zip
33441

Country
Broward

01272004 Chg-P CR2E034 (10/03)

4. FEI Number
65-0803111

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LAKE, MARK
41 SE 9TH STREET
DEERFIELD BEACH, FL 33441

7. Name and Address of New Registered Agent

Name
MARK LAKE

Street Address (P.O. Box Number is Not Acceptable)
41 SE 9th Street Bay 6N

City
Deerfield Beach

FL Zip Code
33441

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE DATE 2-3-04

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LAKE, MARK 730 S DEERFIELD AVE, APT 10 DEERFIELD BEACH, FL 33441	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DATE Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

January 27, 2004

UNLIMITED WOODWORKS, INC.
41 S.E. 9TH STREET
BOY 6N
DEERFIELD BEACH, FL 33441 US

SUBJECT: UNLIMITED WOODWORKS, INC.
Ref. Number: P97000106221

We have received your document for UNLIMITED WOODWORKS, INC. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

Only applications approved by the Department of State are acceptable. Please complete the enclosed approved application and return it to our office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Justin M Shivers
Document Specialist

Letter Number: 404A00005479

*Completed & Signed
2-3-04*