PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000046088

1. Corporation Name

SHUPERT'S FINISH CARPENTRY INC.								
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Principal Place of Business Mailing Address						i ifibilibit irs istat ibitt datri estit settt satti sett	/ WINEL WALES IN	1141 1811 1881
3102 37 AVE W. 3102 37 AVE W.								
BRADENTON FL 34205 BRADENTON FL 34205								
	•					DO NOT WRITE IN THIS SP	ACE	
						3. Date Incorporated or Qualifed		
	`					05/20/1998		
2. Principal P	Place of Business	2a. Mailing	Address			4. FEI Number		ied For
21		26				(D)-000 100 1		Applicable
Suite, Apt. #, etc.		 	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Ad	
22		27	27				· Fee Req	
City & Stat	le	Citx&&	City & State				-\$5:00·₩	- 1
City & Stat	28					Trust Fund Contribution	Added to	Fees
Zip	Country Zip Ci			Country	'	8. This corporation owes the current year Intang		ا ر
24	25	29	30	<u> </u>		1 eracitat i toporty rux.		2 N₀
Name and Address of Current Registered Agent					1	10. Name and Address of New Registered Age	ant	
ALGUNETT (EFFECT)				81	Name	· ·		1
SHUPERT, JEFFREY				82	Street	dress (P.O. Box Number is Not Acceptable)		
3102 37 AVE W.								
BRADENTON FL 34205			83		,			
			•	04	O't-		85 Zip Co	odo.
				84	City	FL !°	35	1
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508,	Florida Statutes,	the above	e-named	rporation submits this statement for the purpose of cha	inging its re	egistered
l office or n	registered agent, or both, in the Stat am familiar with, and accept the oblig	e of Florida, Such	change was auth	orized by	the corpo	tion's board of directors. I hereby accept the appointm	ent as regi	stered
	am familiar with, and accept the oblig	galions of, Section	007.0303, 1 lolluc	a Statutos	•			}
SIGNATURE	Signature, typed or printed name of registered ag	nent and title if anniicable	(NOTE: Re	gistered Aper	nt signature n	pired when reinstating) DATE		— }
			13.		ADDITIONS/CHANGES TO OFFICERS AND I	DIRECTOR	RS IN 12	
TITLE			☐ DELETE	1.1 TITLE		resident	Change	Addition
NAME	[1.2 NAME		effrey shupert		}
STREET ADDRESS				i .	TADDRESS	BIOD 37th AVE. W.		
				1.4 CITY-S		Bradenton, FL 34205		
CITY-ST-ZIP			□ DELETE	2.1 TITLE	(-ZIP		Change	Addition
ł			DELETE			_		
NAME				2.2 NAME]
STREET ADDRESS					TADDRESS			ļ
CITY-ST-ZIP	1 <u>1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 </u>	-	T DELETE	2.4 CITY-S	ST-ZIP		Change	Addition
TITLE	İ		☐ DETE IE	3.1 TITLE			_ Change	L Addition
NAME				3.2 NAME				
STREET ADDRESS	1			3.3 STREE	TADDRESS			
CITY-ST-ZIP				3.4. CITY-5	ST-ZIP			
TITLE	}		□ DELETE	4.1 TITLE		[Change	☐ Addition

CITY-ST-ZIP. 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 on an attachment with an address, with all other like empowered.

4.2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

□ DELETE

☐ DELETE

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

SIGNATURE:

NAME STREET ADDRESS

TITLE

NAME

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90066 023 ***150.00

☐ Addition

☐ Addition

Change

☐ Change