## **PROFIT** CORPORATION ANNUAL REPORT

1000



## FLORIDA DEPARTMENTOS STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

| Principal Place of Business |  |
|-----------------------------|--|
| 7606 MARYLAND AVE.          |  |
| HUDSON EL 34867             |  |

## FILED May 05, 1999 8:00 am Secretary of State 05-05-1999 90186 029 \*\*\*150.00

|                                       | 1000  |                                      |   |                         |                   | <b>—</b>  |   |   |                              |               |        |
|---------------------------------------|---|--------------------------------------|---|-------------------------|-------------------|-----------|---|---|------------------------------|---------------|--------|
| DOCU                                  | MENT # P98000   | 06806                                | 3   |                         |                   | $ \cdot $ |   |   |                              |               |        |
| 1. Corporado                          | YANT FRAMING, INC.  |                                      |   |                         |                   |           |   |   |                              |               |        |
| Kate Dit                              | (Mil Committee mo.  |                                      |   |                         |                   |           | <b>                                  </b>                       | <b>.</b> (1) <b>63</b> (7) <b>16</b> 7) | Popia i popia <b>sa</b> tila | ONES CON REST |        |
|                                       |   |                                      |   |                         |                   |           |   |   |                              |               |        |
| Principal Plac                        | e of Business   | Mailing Ac                           |   |                         |                   |           |   |   |                              |               |        |
| 7606 MARYLAN<br>HUDSON FL 34          |   | 7606 MARY<br>HUDSON F                | 'LAND AVE.<br>1 34667                     |                         |                   |           |   |   |                              |               |        |
| HUDSON TE S                           | <del>~~~</del>  | 11000011                             | 2 0100                                    |                         |                   |           | DO NOT WR   | TE IN THIS                              | SPACE                        |               | -,     |
|                                       |   |                                      |   |                         |                   |           | <ol><li>Date Incorporated or Qualified<br/>07/31/1998</li></ol> |   |                              |               |        |
| 2. Principal P                        | lace of Business  | 2a. Mailing                          | Address                                   |                         |                   |           | 4. FEI Number   |   | Ap                           | plied For     | 1      |
| 21                                    |   | 26                                   |   |                         |                   |           | 30-4763713  | 3                                       |                              | 1 Applicable  | ]      |
| Suite, Apt.                           | #, etc.   | Suite,                               | Apt. #, etc.                              | =                       |                   | - 1       | 5. Certificate of Status Desired                                | а                                       | \$8.75                       |               | 1      |
| 22                                    |   | 27                                   | St1-                                      |                         |                   |           |   |   | Fee Re                       | <u> </u>      | ┨      |
| City & Stat                           | <u>ta</u>   | 28 City &                            | State                                     |                         | _                 | -         | 6. Election Campaign Financing Trust Fund Contribution          |   | \$5.00<br>Added t            |               | 1      |
| Zip                                   | Country   | Zip                                  | <del></del>                               | Country                 | ,                 |           | 8. This corporation owes the cur                                | rent year In                            | itangible                    |               | 1      |
| 24                                    | [25]  | 29                                   | 30  |                         |                   | l         | Personal Property Tax.  |   | ☐ Yes                        | <del> </del>  | ]      |
|                                       | 9. Name and Address of Current  | Registered A                         | gent                                      |                         | ,                 | 1         | 0. Name and Address of New                                      | Registered                              | Agent                        |               | 4      |
| 600                                   | AND APPARETTALL   |                                      |   | 81                      | Name              |           |   |   |                              |               | 1      |
|                                       | ANT, KENNETH H  |                                      |   | 82                      | Street Ad         | ddress    | (P.O. Box Number is Not Accept                                  | able)                                   |                              |               | 1      |
| 7608 MARYLAND AVE.<br>HUDSON FL 34667 |   |                                      | 83  | <u> </u>                |                   |           |   |   |                              | 1             |        |
|                                       |   |                                      |   |                         | <u> </u>          |           |   |   |                              |               | 4      |
|                                       |   |                                      |   | 84                      | City              |           |   | FI                                      | 85 Zip (                     |               | 1      |
| 11. Pursuant                          | to the provisions of Sections 607.0502<br>registered agent, or both, in the State of<br>am familiar with, and accept the obligati | and 607.1508                         | , Florida Statutes, t                     | he abov                 | e-named co        | orporal   | tion submits this statement for the                             | purpose o                               | f changing its               | registered    | 1      |
| office or r<br>agent. I a             | registered agent, or both, in the State o<br>im familiar with, and accept the obligati  | of Florida. Such<br>ions of, Section | i change was autho<br>i 607.0505, Florida | Statutes                | ine corpora       | ation a   | poard of directors, I hereby acce                               | рі ше арро                              | niminoni as io               | Naraion       | 1      |
| SIGNATURE                             |   |                                      |   |                         |                   |           |   |   |                              |               | ١.     |
|                                       | Signature, typed or printed name of registered agent OFFICERS ANI   |                                      |   | stared Aper             | it signature requ | wined who | ADDITIONS/CHANGES TO OF   | FICERS A                                | ND DIRECTO                   | RS IN 12      | 1 8    |
| 12.                                   | Deas ( de o T   |                                      | DELETE                                    | 1.1 TITLE               |                   |           |   |   | ☐ Change                     | Addition      | 11/00/ |
| NAME                                  | Kenneth H. Bryan-   | T                                    | L   | 1.2 NAME                | į.                |           |   |   |                              |               |        |
| STREET ADDRESS                        | 7604 MARYland A   | ve                                   |   | 1.3 STREET              | T ADDRESS         |           |   |   |                              |               | DOE024 |
| CITY-ST-ZIP                           | Kenneth H. Bryan-<br>7604 MARYland A<br>Hudson FL 3   | 4667                                 |   | 1.4 CITY-S              | T-ZIP             |           |   |   |                              |               | Į ĝ    |
| TITLE                                 | VICE President  |                                      |   | 2.1 TITLE               | İ                 |           |   |   | Change                       | Addition      | `      |
| NAME                                  | JUNG MARYland A   | je                                   |   | 22 NAME                 |                   |           |   |   |                              |               |        |
| STREET ADDRESS                        | JUGG MARYIMA  | . 1/. /. 📆                           |   | 2.3 STREET              |                   |           |   |   |                              |               | }      |
| CITY-ST-ZIP                           | Hudson FL 3   | 4001                                 |   | 2.4 CITY-S<br>3.1 TITLE | 1-2P              |           |   | -                                       | Change                       | Addition      | 1      |
| MAME                                  |   |                                      |   | 3.2 NAME                |                   |           |   |   | •                            | _             | 1      |
| - STREET ADDRESS                      |   | _                                    |   | -                       | TADORESS .        |           |   |   |                              |               | _      |
| CITY-ST-ZIP                           | 1   |                                      |   | 34. CITY-S              | T-ZIP             |           |   |   |                              |               | 1      |
| TITLE                                 |   |                                      | ☐ DELETE                                  | 41 TITLE                |                   |           |   |   | ☐ Change                     | Addition      |        |
| NAME                                  |   |                                      |   | 4, 2 NAME               |                   |           |   |   |                              |               |        |
| STREET ADDRESS                        | 1   |                                      | i   |                         | ADDRESS           |           |   |   |                              |               | 1      |
| CITY-ST-ZIP                           |   | <u></u> -                            |   | 4.4 CITY-5<br>5.1 TITLE | T-ZIP             |           |   |   | Change                       | Addition      | 1      |
| TITLE                                 |   |                                      |   | 5.2 NAME                |                   |           |   |   |                              |               | 1      |
| NAME<br>STREET ADDRESS                |   |                                      |   | 5.3 STREET              | ADDRESS           |           |   |   |                              |               |        |
| CITY-ST-ZIP                           |   |                                      | 1   | 5.4 CITY-S              | r-ze              |           |   |   |                              |               | 1      |
| TITLE                                 |   |                                      | DELETE                                    | 6.9 TITLE               |                   |           |   |   | Change                       | Addition      | -      |
| NAME                                  |   |                                      |   | 6.2 NAME                |                   |           |   |   |                              |               | 1      |
| STREET ADDRESS                        |   |                                      |   |                         | ADDRESS           |           |   |   |                              |               |        |
| CITY-ST-78P                           | <b>\</b>  |                                      | •   | 6.4 CITY-S              | 1.20              | \         |   |   |                              | _             | 1      |

14. 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 operates 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 poster attachment with an address, with all the ellipse empowered?

SIGNATURE:

ATURE AND THED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR