


**FILED**  
**Apr 29, 1999 8:00 am**  
**Secretary of State**

04-29-1999 90261 002 \*\*\*150.00

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P98000068223**

1. Corporation Name  
**U.S. DESIGN & CUSTOM MILLWORK, CORP.**

Principal Place of Business 12011 AMEDICUS LANE #3 FORT MYERS FL 33907	Mailing Address 12011 AMEDICUS LANE #3 FORT MYERS FL 33907
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	3. Date Incorporated or Qualified 08/05/1998	4. FEI Number 65-0854880	Applied For <input type="checkbox"/> Not Applicable
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	27. City & State	28. City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
22. City & State	27. City & State	28. City & State	29. City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
23. Zip	28. Zip	29. Zip	30. Zip	8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

## 9. Name and Address of Current Registered Agent

**DINKEL, STEVE**  
 12011 AMEDICUS LANE #3  
 FORT MYERS FL 33907

## 10. Name and Address of New Registered Agent

81. Name	<b>TODD DITMER</b>
82. Street Address (P.O. Box Number is Not Acceptable)	<b>2227 CARRELL RD.</b>
83. City	<b>FT. MYERS</b>
84. State	<b>FL</b>
85. Zip Code	<b>33907</b>

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input type="checkbox"/> DELETE	1.1 TITLE	VICE-PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DINKEL, STEVE	1.2 NAME	TODD DITMER
STREET ADDRESS	12011 AMEDICUS LANE #3	1.3 STREET ADDRESS	2227 CARRELL RD
CITY-ST-ZIP	FORT MYERS FL 33907	1.4 CITY-ST-ZIP	FORT MYERS, FL 33901
TITLE	D <input checked="" type="checkbox"/> DELETE	2.1 TITLE	
NAME	THOMAS, TERRY	2.2 NAME	
STREET ADDRESS	12011 AMEDICUS LANE #3	2.3 STREET ADDRESS	
CITY-ST-ZIP	FORT MYERS FL 33907	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)