FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S63734

Principal Place of Business

STREET ADDRESS

CITY-ST-ZIP

PLG CUSTOM CABINETS & WOODWORK, INC.

3. Date Incorporated or Qualifed	\$8.75	Applied For Not Applied	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 26 59-3073131 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 22 27	\$8.75	Not Applic	
21 26 59-3073131 Suite, Apt. #, etc. Suite, Apt. #, etc. 22 27 5. Certificate of Status Desired	\$8.75		or .
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired		5 Addition	able
22 27 5. Certificate of Status Desired	Fee		al
		Required	
Only a State 1 Street 1 Only a State 1 10, Election Campaign Financing — .	\$5.0	0 May Be	•
23 Trust Fund Contribution		ed to Fees	
Zip Country Zip Country 8. This corporation owes the current year Intar	ngible		-
24 25 29 30 Personal Property Tax.	☐ Yes	■No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered A	gent		
81 Name			
GONZALEZ, PEDROLUIS 82 Street Address (P.O. Box Number is Not Acceptable)			
4701 N. HESPERIDES ST.	_ , , . 1 41		
TAMPA FL 33614 83		自機原	
84 City	85 Zi	ip Code	1941
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 c			
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 conflice 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 appoint agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE			٠,
Signature, types of printed frame of registered again one little in opprisone.			-,
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND		TORS IN	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND TITLE PD DELETE 1.1 TITLE	D DIREC	TORS IN	12 ddition
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND TITLE PD DELETE 1.1 TITLE GONZALEZ, PEDROLUIS 12 NAME		TORS IN	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 1.1 TITLE PD DELETE 1.1 TITLE GONZALEZ, PEDROLUIS 1.2 NAME STREET ADDRESS 6917 W. COMANCHE AVENUE 13 STREET ADDRESS		TORS IN	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND TITLE PD DELETE 1.1 TITLE GONZALEZ, PEDROLUIS 1.2 NAME STREET ADDRESS 6917 W. COMANCHE AVENUE 1.3 STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 1.4 CITY-ST-ZIP	Chang	TORS IN	ddition
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11.1 TITLE PD GONZALEZ, PEDROLUIS 1.2 NAME STREET ADDRESS 6917 W. COMANCHE AVENUE 1.3 STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 1.4 CITY-ST-ZIP 1.4 CITY-ST-ZIP 2.1 TITLE STD DELETE 2.1 TITLE		TORS IN	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 1.1 TITLE PD GONZALEZ, PEDROLUIS 1.2 NAME 1.2 NAME 5TREET ADDRESS 6917 W. COMANCHE AVENUE 1.3 STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 1.4 CITY-ST-ZIP TITLE STD DELETE 2.1 TITLE STD DELETE 2.1 TITLE GONZALEZ, LUISA CRISTINA 22 NAME	Chang	TORS IN	ddition
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 1.1 TITLE PD GONZALEZ, PEDROLUIS 1.2 NAME 5TREET ADDRESS 6917 W. COMANCHE AVENUE 1.3 STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 1.4 CITY-ST-ZIP TITLE STD DELETE 2.1 TITLE STD DELETE 2.1 TITLE STD CONZALEZ, LUISA CRISTINA 22 NAME 6917 W. COMANCHE AVENUE 23 STREET ADDRESS 6917 W. COMANCHE AVENUE 23 STREET ADDRESS	Chang	TORS IN	ddition
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11.1 TITLE PD GONZALEZ, PEDROLUIS 12.NAME 12.NAME 5TREET ADDRESS 6917 W. COMANCHE AVENUE 13.STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 14.CITY-ST-ZIP TITLE STD DELETE 21.1 TITLE STD DELETE 21.1 TITLE GONZALEZ, LUISA CRISTINA 22.NAME 5TREET ADDRESS 6917 W. COMANCHE AVENUE 23.STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 24.CITY-ST-ZIP CAMPA FL 33634 24.CITY-ST-ZIP	☐ Chang	TORS IN ge	ddition
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND TITLE PD DELETE 1.1 TITLE GONZALEZ, PEDROLUIS 1.2 NAME 5TREET ADDRESS 6917 W. COMANCHE AVENUE 1.3 STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 1.4 CITY-ST-ZIP TITLE STD DELETE 2.1 TITLE GONZALEZ, LUISA CRISTINA 2.2 NAME 5TREET ADDRESS 6917 W. COMANCHE AVENUE 2.3 STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 2.4 CITY-ST-ZIP TAMPA FL 33634 3.5 TREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 3.5 TREET ADDRESS 3.1 TITLE 3.5 TITLE 3.1 TITLE 3.5 TITLE 3.1 T	Chang	TORS IN ge	ddition
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11.1 TITLE PD DELETE 1.1 TITLE 1.2 NAME GONZALEZ, PEDROLUIS 12. NAME 13. STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 14. CITY-ST-ZIP TITLE STD DELETE 2.1 TITLE STD DELETE 2.1 TITLE GONZALEZ, LUISA CRISTINA 2.2 NAME STREET ADDRESS 6917 W. COMANCHE AVENUE 2.3 STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 2.4 CITY-ST-ZIP TAMPA FL 33634 2.4 CITY-ST-ZIP TITLE 3.1 TITLE 3.1 TITLE 3.1 TITLE 3.2 NAME 3.2 NAME	☐ Chang	TORS IN ge	ddition
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND TITLE PD DELETE 1.1 TITLE GONZALEZ, PEDROLUIS 1.2 NAME 5TREET ADDRESS 6917 W. COMANCHE AVENUE 1.3 STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 1.4 CITY-ST-ZIP TITLE STD DELETE 2.1 TITLE GONZALEZ, LUISA CRISTINA 2.2 NAME 5TREET ADDRESS 6917 W. COMANCHE AVENUE 2.3 STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE 3.1 TITLE 3.2 NAME 3.2 NAME 3.3 STREET ADDRESS 3.3 STREET ADDRE	☐ Chang	TORS IN ge	ddition
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS ITITLE PD GONZALEZ, PEDROLUIS STREET ADDRESS G17 W. COMANCHE AVENUE TAMPA FL 33634 14 CITY-ST-ZIP ITITLE STD DELETE 1.1 TITLE STD DELETE 21 TITLE STD GONZALEZ, LUISA CRISTINA 22 NAME STREET ADDRESS G17 W. COMANCHE AVENUE 2.3 STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE STD TITLE STD TAMPA FL 33634 1.4 CITY-ST-ZIP DELETE 3.1 TITLE 3.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE 3.3 STREET ADDRESS CITY-ST-ZIP TITLE 3.3 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP 3.5 CITY-ST-ZIP 3.5 CITY-ST-ZIP 3.6 CITY-ST-ZIP	Chang	ge A	ddition ddition
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS DELETE 1.1 TITLE GONZALEZ, PEDROLUIS 1.2 NAME 5TREET ADDRESS 6917 W. COMANCHE AVENUE 1.3 STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 1.4 CITY-ST-ZIP TITLE GONZALEZ, LUISA CRISTINA 2.2 NAME 2.3 STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 2.4 CITY-ST-ZIP TITLE GONZALEZ CITY-ST-ZIP TAMPA FL 33634 2.4 CITY-ST-ZIP TITLE GONZALEZ GO	Chang	ge A	ddition ddition
TITLE PD DELETE 1.1 TITLE GONZALEZ, PEDROLUIS 1.3 STREET ADDRESS 6917 W. COMANCHE AVENUE 1.3 STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 1.4 CITY-ST-ZIP TAMPA FL 33634 2.2 NAME GONZALEZ, LUISA CRISTINA 2.2 NAME STREET ADDRESS 6917 W. COMANCHE AVENUE 2.3 STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 2.4 CITY-ST-ZIP TAMPA FL 33634 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP	Chang	ge A	ddition ddition
TITLE PD DELETE 1.1 TITLE NAME GONZALEZ, PEDROLUIS STREET ADDRESS 6917 W. COMANCHE AVENUE 1.3 STREET ADDRESS CITY. ST. ZIP TITLE STD DELETE 1.4 CITY. ST. ZIP TITLE STD DELETE 2.1 TITLE STD DELETE 2.1 TITLE STD DELETE 2.1 TITLE STD DELETE 2.1 TITLE STREET ADDRESS CITY. ST. ZIP TITLE STEET ADDRESS CITY. ST. ZIP TITLE STEET ADDRESS CITY. ST. ZIP TITLE STEET ADDRESS CITY. ST. ZIP TITLE NAME STREET ADDRESS	Chang	ge A	ddition ddition
TITLE PD DELETE 1.1 TITLE GONZALEZ, PEDROLUIS 1.3 STREET ADDRESS 6917 W. COMANCHE AVENUE 1.3 STREET ADDRESS 6917 W. COMANCHE AVENUE 1.4 CITY-ST-ZIP TAMPA FL 33634 1.4 CITY-ST-ZIP TAMPA FL 33634 2.2 NAME STREET ADDRESS 6917 W. COMANCHE AVENUE 2.3 STREET ADDRESS 6917 W. COMANCHE AVENUE 3.3 STREET ADDRESS 6917 W. COMANCHE AVENUE 3.3 STREET ADDRESS 6917 W. COMANCHE AVENUE 3.3 STREET ADDRESS 6917 W. COMANCHE AVENUE 4.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP 3.5 STREET ADDRESS 6917 W. COMANCHE AVENUE 4.5 NAME 3.3 STREET ADDRESS 6917 W. COMANCHE AVENUE 4.5 NAME 3.3 STREET ADDRESS 6917 W. COMANCHE AVENUE 4.5 NAME 3.3 STREET ADDRESS 6917 W. COMANCHE AVENUE 4.5 NAME 4.5	Chang	TORS IN ge A	ddition
TITLE PD DELETE 1.1 TITLE NAME GONZALEZ, PEDROLUIS STREET ADDRESS CITY-ST-ZIP TITLE STD DELETE 2.1 TITLE NAME GONZALEZ, LUISA CRISTINA STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 TITLE GONZALEZ, LUISA CRISTINA STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 TITLE GONZALEZ, LUISA CRISTINA STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 TITLE DELETE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE	Chang	TORS IN ge A	ddition ddition
12.	Chang	TORS IN ge A	ddition
12. OFFICERS AND DIRECTORS TITLE PD OFFICERS AND DIRECTORS TITLE NAME GONZALEZ, PEDROLUIS STREET ADDRESS GONZALEZ, PEDROLUIS STREET ADDRESS GONZALEZ, LUSA CRISTINA GONZALEZ, LUISA CRISTINA GONZALEZ, LUISA CRISTINA GONZALEZ, LUISA CRISTINA GONZALEZ, LUISA CRISTINA GONZALEZ, LUSA CRISTINA GONZ	Chang	TORS IN ge A	ddition
TITLE PD DELETE 1.1 TITLE GONZALEZ, PEDROLUIS 12. NAME GONZALEZ, PEDROLUIS 13. STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 14. CITY-ST-ZIP TAMPA FL 33634 14. CITY-ST-ZIP TAMPA FL 33634 22. NAME GONZALEZ, LUISA CRISTINA 22. NAME GONZALEZ, LUISA CRISTINA 22. NAME GONZALEZ, LUISA CRISTINA 23. STREET ADDRESS CITY-ST-ZIP TAMPA FL 33634 24. CITY-ST-ZIP TITLE DELETE 31. TITLE NAME 32. NAME 33. STREET ADDRESS CITY-ST-ZIP TITLE 33. STREET ADDRESS CITY-ST-ZIP TITLE 34. CITY-ST-ZIP TITLE 44. CITY-ST-ZIP TITLE 45. NAME 45. NAME 45. NAME 45. NAME 45. NAME 55. N	Chang	ge A	ddition

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 of 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 receives or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in SIGNATURE

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

FILED

Feb 16, 1999 8:00am

Secretary of State

02-16-1999 90056 003 ***158.75