

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northington
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR 10 PM 3:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 631037 (9)

1. Corporation Name
CONTINENTAL WINDOWS AND GLASS, INC.

Principal Place of Business Mailing Address
**4653 L. B. MCLEOD ROAD, SUITE A
ORLANDO FL 32811** **4653 L. B. MCLEOD ROAD, SUITE A
ORLANDO FL 32811**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 3a. Date of Last Report
07/19/1979 **04/21/1994**

4. FEI Number Applied For
59-1962524 Not Applicable

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

6. Election Campaign Financing **\$5.00 May Be
Trust Fund Contribution Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address

21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.

22. City & State 27. City & State

23. Zip 28. Zip Country 30. Country

24. 25. 29. 30.

9. Name and Address of Current Registered Agent

**MIRANDA, EDMUND A
4653 L. B. MCLEOD ROAD, SUITE A
ORLANDO FL 32811**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City 85. Zip Code

FL

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 (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	SP
NAME	MIRANDA, EDMUND A
STREET ADDRESS	4653 L.B. MCLEOD RD. #A
CITY - ST - ZIP	ORLANDO FL
TITLE	VP
NAME	MIRANDA, JILL
STREET ADDRESS	4653 L.B. MCLEOD RD. #A
CITY - ST - ZIP	ORLANDO FL
TITLE	VP
NAME	RODRIGUIS, JOSE
STREET ADDRESS	4653 L.B. MCLEOD RD. #A
CITY - ST - ZIP	ORLANDO FL
TITLE	VP
NAME	MIRANDA, JOHN
STREET ADDRESS	4653 L.B. MCLEOD RD. #A
CITY - ST - ZIP	ORLANDO FL
TITLE	VP
NAME	HAWK LINDA
STREET ADDRESS	4653 LB MCLEOD RD STE A
CITY - ST - ZIP	ORLANDO FL
TITLE	VP
NAME	AVERY LISA
STREET ADDRESS	4653 LB MCLEOD RD STE A
CITY - ST - ZIP	ORLANDO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	600001453996
1.4 CITY - ST - ZIP	-04/12/95--01020--026
2.1 TITLE	***200.00 ***200.00
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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.

SIGNATURE: *[Signature]* SP 4/11/95 407-427-9587

Signature and Typed or Printed Name of Signing Officer or Director Title Telephone Number