

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

FILED
Mar 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 631037 (9)

1. Corporation Name
CONTINENTAL WINDOWS AND GLASS, INC.



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

Mailing Address
**4653 L. B. MCLEOD ROAD, SUITE A
 ORLANDO FL 32811-5603**

3. Date Incorporated or Qualified 07/19/1979	3a. Date of Last Report 03/07/1996
4. FEI Number 59-1962524	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 State, Apt. #, etc.	26 State, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	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

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	<input type="checkbox"/> DELETE
NAME	MIRANDA, EDMUND A	
STREET ADDRESS	4653 L.B. MCLEOD RD. #A	
CITY-ST-ZIP	ORLANDO FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	MIRANDA, JILL	
STREET ADDRESS	4653 L.B. MCLEOD RD. #A	
CITY-ST-ZIP	ORLANDO FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	RODRIGUIS, JOSE	
STREET ADDRESS	4653 L.B. MCLEOD RD. #A	
CITY-ST-ZIP	ORLANDO FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	MIRANDA, JOHN	
STREET ADDRESS	4653 L.B. MCLEOD RD. #A	
CITY-ST-ZIP	ORLANDO FL	
TITLE	VP	<input type="checkbox"/> DELETE
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	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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 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.

SIGNATURE: _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)

3-1597 407-422-9897