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

PROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED Apr 29 1998 8:00am

	1998	DIVISION OF CO		}	Secretary	7 of S1	tate
 Corporation 	MENT # M11217 ERFAUX WALLS, INC.	7 (0)					
***************************************	an non three, mo.						
Principal Place	e of Business	Mailing Address)
4411 S.W. 1ST ST. PLANTATION FL 33317		4411 S.W. 1ST ST. PLANTATION FL 33317		Ì			
PENNIKIRA PE 33017		PENNIKHON PE 35077		Ĺ	DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified 02/12/1985		
2. Principal Pl	lace of Business	2a. Mailing Address	HEA		4. FEI Number		Applied For
Suite, Apt. #, etc.		26 10120 NW 131 ST Suite, Apt #, etc.,			59-2508593		Not Applicable
Suite, Apt. W, etc.		27 N/A		ļ	5. Certificate of Status Desired	T	Additional Required
City & State	9	City & State			6. Election Campaign Financing		0 May Be
23		28 PIONTOTION			Trust Fund Contribution		d to Fees
Zip 24	Country	Zip 33322 3	Country	m	 This corporation owes or has paid the Personal Property Tax due June 30. 		ntangible No
27	9. Name and Address of Current	1-11			10. Name and Address of New Regist		
SALOWE, KENNETH A. 81 Name							
-4411 S.W. 1ST ST.			82 Street /	Addres	s (P.O. Box Number is Not Acceptable)		
PLANTATION FL 83317/			83	112	0 NW 1324 3	<u>π, </u>	
	//						
	11/		84 City	مما	MOITATION	FL 85 Zig	Code 3シ2こ
11. Pursuant to the provisions of feetions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submoffice or registered apoly probable in the State of Florida Such change was authorized by the corporation's board of agent. I am familiar with page accept the obligations of, Section 607.0505, Florida Statutes.					ation submits this statement for the purp	ose of changing	its registered
agent. I am familiar with we accept the obligations of, Section 607.0505, Florida Statutes.					is board of directors. Thereby accept th	ie appointment a	is reflictered
SIGNATURE	Signature, types that you prove of registered agord	OCT.	Registered Agent eignature	***************************************	4/2	3/98	
12.	(OFFICERS AND		13.	Tednieo	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTO	ORS IN 12
TITLE	P	DELETE	1.1 TITLE			Change	Addition
NAME	SALOWE, KENNETH ALLEN		12 NAME		72 ATEI WH 051		
STREET ADDRESS	4411 S.W. 1ST ST. PLANTATION FL		1.3 STREET ADDRESS		WIATION, FL 333	.27	ſ
CITY-\$1-ZIP TITLE	T	DELETE	1.4 CITY-ST-ZIP 2 1 TITLE		0111100, 4L 300	Change	Addition
RAME	BECK, JAMES	-	2.2 NAME			_ •	
STREET ADDRESS	9301 N.W. 1ST CT.		2.3 STREET ADDRESS				í
CITY-ST-ZIP	PEMBROKE PINES FL	T on the	2.4 CITY-ST-ZIP				1.4400
TITLE NAME	s Leach, Marianne	☐ DELETE	3.1 TITLE 3.2 NAME			Change	Addition
STREET ADDRESS	2360 WILTON RD		3.3 STREET ADDRESS				
CITY-ST-ZIP	WILTON MANORS FL		3.4. CITY-ST-ZIP				
TITLE		DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP TITLE		DELETE	4.4 CHTY-ST-ZIP 5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-S1-ZIP			5.4 CITY-ST-ZIP	<u> </u>			A 4490
TITLE		DELETE	61 TITLE			Change	: Addition
NAME STREET ADDRESS		//	6.2 NAME 6.3 STREET ADDRESS				
CITY-ST-ZIP	.//	/	6.4 CITY-ST-ZIP				
14. I hereby c	ertify that the information supplied with on this annual report or supplied with	this filing does not qualify for annual report is true and accur	the exemption state	id in Se	oction 119.07(3)(i), Florida Statutes. I furt shall have the same legal effect as if ma	her certify that that de under oath; t	ne information hat I am an

officer or director of the corporation or the dever 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 interpretable the second trustee of the second trust

SIGNATURE:

(959) 810-9580