

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000079672

1. Entity Name
AWNINGS OF HOLLYWOOD, INC.

FILED
Apr 23, 2000 8:00 am
Secretary of State

04-23-2000 90033 033 ***150.00

Principal Place of Business 5828 WASHINGTON ST. HOLLYWOOD FL 33023	Mailing Address 5828 WASHINGTON ST. HOLLYWOOD FL 33023-1947
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0449898	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
KREILING, EDWARD P
1625 N. COMMERCE PWKY, SUITE 225
FT. LAUDERDALE FL 33326

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	THOMPSON, GERALD R	
STREET ADDRESS	5828 WASHINGTON ST.	
CITY-ST-ZIP	HOLLYWOOD FL 33023	
TITLE	VP	<input type="checkbox"/> Delete
NAME	THOMPSON, CHRISTOPHER	
STREET ADDRESS	5828 WASHINGTON ST.	
CITY-ST-ZIP	HOLLYWOOD FL 33023	
TITLE	VP	<input type="checkbox"/> Delete
NAME	THOMPSON, GERALD M	
STREET ADDRESS	5828 WASHINGTON ST.	
CITY-ST-ZIP	HOLLYWOOD FL 33023	
TITLE	S	<input type="checkbox"/> Delete
NAME	THOMPSON, CRYSTAL	
STREET ADDRESS	5828 WASHINGTON ST.	
CITY-ST-ZIP	HOLLYWOOD FL 33023	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Crystal Thompson Date: 4/14/00 Daytime Phone #: 903-7717
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)