

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P95000044879 (1)**

1. Corporation Name

**A & B SHUTTERS AND SCREENS, INC.**



Principal Place of Business

Mailing Address

8751 N.W. 7TH CT.  
PEMBROKE PINES FL 33024

8751 N.W. 7TH CT.  
PEMBROKE PINES FL 33024

3. Date Incorporated or Qualified

3a. Date of Last Report

06/02/1995

2. Principal Place of Business

2a. Mailing Address

21 16292 N.W. 17th St

26 16292 N.W. 17th St

4. FEI Number

Applied For

Not Applicable

65-0594216

22

City & State

27

City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 PEMBROKE PINES FL

28 PEMBROKE PINES, FL

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24 33028 25 Country

29 33028 30 Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RITTER, GREGORY J ESQ.  
7000 W. PALMETTO PARK RD.  
SUITE 400  
BOCA RATON FL 33433

81 Name

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

83

84 City

FL

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

Signature typed or printed name of registered agent and filer (if applicable)

(DATE) Registered Agent Signature required when reinstating

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  DELETE  
NAME PERRY, RICHARD  
STREET ADDRESS 8751 N.W. 7TH CT.  
CITY-ST-ZIP PEMBROKE PINES FL 33024

1.1 TITLE  Change  Addition  
1.2 NAME PERRY, RICHARD  
1.3 STREET ADDRESS 16292 N.W. 17th St  
1.4 CITY-ST-ZIP PEMBROKE PINES, FL 33028

TITLE D  DELETE  
NAME PERRY, WAYNE  
STREET ADDRESS 8751 N.W. 7TH CT.  
CITY-ST-ZIP PEMBROKE PINES FL 33024

2.1 TITLE  Change  Addition  
2.2 NAME PERRY, WAYNE  
2.3 STREET ADDRESS 16292 N.W. 17th St  
2.4 CITY-ST-ZIP PEMBROKE PINES, FL 33028

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  Change  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 119.07(3)(k), 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: *Richard Perry* RICHARD PERRY 2/19/98 (954) 432-6056

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)