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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000062471

FINE HOME IMPROVEMENT, INC.

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90165 046 ***150.00



Principal Place	of Business	Mailing Address		_	
2800 NORTH WI	EST 36TH AVENUE	2800 NORTH WEST 36TH AVE	NUE		
LAUDERDALE LA		LAUDERDALE LAKES FL 3331	1		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					07/15/1998
O Date de el Di	and of Division on	2a. Mailing Address			4, FEI Number Applied For
, 2. Principal Pl	ace of Business	⊢			65-0851740 Not Applicable
Suite, Apt. i	# atc	Suite, Apt. #, etc.			\$8.75 Additional
	#, etc.	27			5. Certificate of Status Desired Fee Required
City & State		City & State			6. Election Campaign Financing 55.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Countr	у	8. This corporation owes the current year Intangible
24	25	29 30	5		Personal Property Tax.
	9. Name and Address of Current		1		10. Name and Address of New Registered Agent
			8	1 Na	Name
PITTE	ER, CARL S		8:		Street Address (P.O. Box Number is Not Acceptable)
7447	NORTH WEST 57 STREET		8.	2 Sir	Street Address (P.O. Box Number is Not Acceptable)
TAMA	ARAC FL 33319		8:	3	
\	e"		<u> </u>	 	OS 75 Code
			8	4 Cit	City FL 85 Zip Code
11 Durement t	to the provisions of Sections 607 0502	and 607 1508 Florida Statutes.	the abo	ve-nan	accord composition submits this statement for the purpose of changing its registered
Office or re	edistered agent, or both, in the State o	t Florida. Such change was autr	ionzea p	v ine c	the corporation's board of directors. I hereby accept the appointment as registered
agent. I ar	n familiar with, and accept the obligation	ons or, Section 607.0505, Florida	a Statute	. co.	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: Re	aistered Aa	ent signa	ignature required when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DPT	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	GRIFFITHS, WESLEY A		1.2 NAME		
STREET ADDRESS	2800 NORTH WEST 36TH AVEN	IUE	1.3 STRE	RODA TE	DDRESS
CITY-ST-ZIP	LAUDERDALE LAKES FL 33311	· - -	1.4 CITY-	ST-ZIP	ZIP
TITLE	VPS	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	GRIFFITHS, YULANDA		2.2 NAME		
STREET ADDRESS	2800 NORTH WEST 36TH AVEN	IUE	2.3 STRE	ET ADDR	DDRESS
CITY-ST-ZIP	LAUDERDALE LAKES FL 33311		2.4 CITY		
TITLE	DIODEROFILE DIVICO I E COST.	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STRE		DDRESS
1			3.4. CITY		
CITY-ST-ZIP		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAM		
			4.3 STRE		DDRESS
STREET ADDRESS			4.3 STRE		
CITY-ST-ZIP		☐ DELETE	5.1 TITLE		Change Addition
TITLE			5.2 NAME		
NAME			5.3 STRE		ODRESS
STREET ADDRESS			5.4 CITY-		
CITY-ST-ZIP		C) DOLOTE	6.1 TITLE		Change Addition
TITLE		☐ DELETE	1		Countries C Modulou :
NAME			6.2 NAME		PODECC
STREET ADDRESS					DORESS
CITY-ST-ZIP			6.4 CITY-	ST-ZIP	<u></u>

14. 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 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, with all other like empowered.

SIGNATURE: MESIGN	Sollow	4
SIGN	ATURE AND TYPED OF P	RII