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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000044879 (1)

Country

9. Name and Address of Current Registered Agent

25

RITTER, GREGORY J ESQ. 7000 W. PALMETTO PARK RD.

BOCA RATON FL 33433

SUITE 400

A & B SHUTTERS AND SCREENS, INC.

Principal Place of Business Mailing Address 16292 NW 17TH ST 16292 NW 17TH ST PEMBROKE PINES F: 33028 PEMBROKE PINES FL 33028-1724 3. Date Incorporated or Qualified 3a. Date of Last Report 06/02/1995 04/17/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 4691 S.W. 45+ns it 65-0594216 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 27 City & State City & State 6. Election Campaign Financing

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.

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84 City

Country

Name

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SIGNATURE DATE Signature, typed or pointed name of registered agent and life if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. (96/6)DELETE ☐ Change ☐ Addition 1.1 THLE THEF PERRY, RICHARD NAME 1.2 NAME 16292 NW 17TH ST 1.3 STREET ADDRESS STREET ADDRESS PEMBROKE PINES FL CHY-51-ZIP 1.4 CITY - ST - ZIP Change Addition DELETE TITLE 2.1 TITLE PERRY WAYNE PERRY, WAYNE 22 NAME NAME 7630 JUNIPER ST 16292 NW 17TH ST 2.3 STREET ADDRESS STREET ADDRESS PEMBROKE PINES FL 2 4 CITY-ST-ZIP **CITY - S1 - 26** DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4. CITY - ST - ZIP CITY-SI-Zi-DELETE Change Addition 4.1 TULE THUE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP 011 Y - S1 - 20F DELETE Change Addition 5.1 TITLE THE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIE DELETE Change Addition THE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP Olfr-SI-7P

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 atjachment with an address.

FILED

Apr 09 1997 8:00am

Secretary of State

Yes No

8. This corporation has liability for intangible tax under s. 199.032,

10. Name and Address of New Registered Agent

Trust Fund Contribution

Florida Statutes

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

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Zip Code

Not Applicable