

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

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortherm Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000039968 (8)
 1. Corporation Name
AMERICAN VERTICAL BLINDS, INC.

Principal Place of Business 1501 S.E. DECKER AVE. #308 STUART FL 34994	Mailing Address 1501 S.E. DECKER AVE. #308 STUART FL 34994-3984
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9. Date Incorporated or Qualified 05/08/1996	9e. Date of Last Report
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2. Principal Place of Business 21 9904 SOUTHERN BLVD Suite, Apt. #, etc.	2a. Mailing Address 26 9904 SOUTHERN BLVD Suite, Apt. #, etc.
22 City & State 23 WEST PALM BCH FL	27 City & State 28 WEST PALM BEACH
24 13411 25 WEST PALM	29 13411 30 WEST PALM

4. FEI Number 05-0672808	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for tangible Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	tax under s. 199.032

8. Name and Address of Current Registered Agent
PICCOLO, DAVID M PA
900 E. INDIANTOWN RD.
SUITE 316
JUPITER FL 33477

10. Name and Address of New Registered Agent	81 Name
	82 Street Address (P.O. Box Number is Not Acceptable)
	83
	84 City
	85 FL
	86 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 _____ DATE _____
Signature, typed or printed name of registered agent and his or her title. (NOTE: Registered Agent signature required when taking office)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE SVD	NAME SHANAHAN, MARK	1.1 TITLE	1.2 NAME
STREET ADDRESS 1501 SE. DECKER AVE. #308	CITY-ST-ZIP STUART FL 33994	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
TITLE PTD	NAME JOHNSON, WILLIAM	2.1 TITLE	2.2 NAME
STREET ADDRESS 1501 SE. DECKER AVE. #308	CITY-ST-ZIP STUART FL 33994	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
TITLE	NAME	3.1 TITLE	3.2 NAME
STREET ADDRESS	CITY-ST-ZIP	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
TITLE	NAME	4.1 TITLE	4.2 NAME
STREET ADDRESS	CITY-ST-ZIP	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
TITLE	NAME	5.1 TITLE	5.2 NAME
STREET ADDRESS	CITY-ST-ZIP	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
TITLE	NAME	6.1 TITLE	6.2 NAME
STREET ADDRESS	CITY-ST-ZIP	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP

10000229	09/11/97	01123-022	****165.00
Change	Addition	Change	Addition
Change	Addition	Change	Addition
Change	Addition	Change	Addition

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. If 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 of Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ SIGNATURE: *Mark F. Shanahan*
SIGNATURE AND TYPED OR PRINTED NAME OF APPLICANT OR PROXIMATE
MARK F. SHANAHAN

30
9-11-97

(2)

1300
Feb 26 19 97

TO	Department of	TOTAL	
OF	STATE	THIS CHECK	165 -
	Corporate	OTHER TRANS. +/-	
	Yes.	BALANCE	2491.65
FOR		TAX DEDUCTIBLE <input type="checkbox"/>	

1301
Feb 26 19 97

TO	Florida	TOTAL	
OF	Dept	THIS CHECK	8 77
	Revenue	OTHER TRANS. +/-	
		BALANCE	2472.88
FOR		TAX DEDUCTIBLE <input type="checkbox"/>	

TO WHOM IT MAY CONCERN:

DU 9/5/97, MY ACCOUNTANT CONTACTED ME CONCERNING PAPERWORK ON SOME NEW EMPLOYEES. AT THE TIME HE MENTIONED THAT CHECK # 1300 FROM 2/26/97 + SENT TO DEPT. OF STATE WAS NEVER CASHED. UPON CALLING DIVISION OF CORPORATIONS, I WAS INFORMED THAT OUR ANNUAL REPORT WAS MISSING OUR FEI #. FURTHER, I WAS INFORMED THAT THE CHECK + INCOMPLETE FORM HAD BEEN MAILED TO 1501 S.E. DECKER AVE, SUITE 101, IN MARCH. UPON DISCUSSING THIS WITH MY PARTNER BILL JOHNSON, I WAS INFORMED THAT THE REPORT WAS NOT RETURNED, + THAT THE ONLY RECEIVED NOTICE OF PAYMENT DUE. SINCE WE HAD THE CHECK STUB (SEE LEFT), WE ASSUMED THAT SOME MISTAKE HAD BEEN MADE AT DEPT. OF STATE. WHEN WE RECEIVE THESE FORMS, THEY ARE PRE-PRINTED. WE SEND THE BOTTOM + SEND + CHECK. WE ASSUMED WE GAVE THE BOTTOM WAS PRE-PRINTED ON THE THAT ALL INFORMATION WAS PRE-PRINTED OVER A FORM. AFTER HAVING OUR ACCOUNTANT TRY OVER A COPY OF THE REPORT, WE NOTICED THAT THE FEI. WAS INDEED BLANK. HOWEVER, THIS WAS UNKNOWN TO US TIL 9/5/97. PLEASE ACCEPT OUR RE-SUBMITTED REPORT, COPY OF CANCELLED CHECK STUB, + CHECK FOR \$165.00. AS FAR AS WE KNOW, EVERYTHING WAS FINE UNTIL 9/5/97.

THANK YOU,
MARIE STANWORTH
AMERICAN VETERAN BLINDS