## J-24 9 1 B-2250 CILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 24 1997 8:00am

Secretary of State

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## Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 386536

(7)

ADVANCE WALLCOVERING DISTRIBUTORS, INC.

information indicated on this annual report or supplemental at Lam an officer or director of the corporation or the receiver of

Principal Prace of Business Mailing Address 1300 STIRLING RD. 1300 STIRLING RD. DANIA FL 33004 DANIA FL 33004-3537 3. Date Incorporated or Qualified 3a. Date of Last Report 08/06/1971 03/19/1996 2. Principal Place of Business 21 P. O. Box 1727 2a. Mailing Address 4. FEI Number Applied For P.O. Box 1727 59-1364874 Not Applicable Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be BUCA RATON, FL Trust Fund Contribution 28 Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, X Yes No Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name GARRIS, LOUIS A 4740 S OCEAN BLVD Street Address (P.O. Box Number is Not Acceptable) 82 HIGHLAND BCH, FL 33487 83 84 Zip Code 11. Pursuant to the provisions of Sections 607.05:02 and 607.15:08, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent for 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. Lamifam har with, and accept the obligations of, Section 607.05:05, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and time if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 DST Change Addition DELETE 1.1 TITLE THEF GARRIS, CHARLOTTE 1.2 NAME NAME 4740 S OCEAN BLVD STREET ADDRESS 1.3 STREET ADDRESS HIGHLAND BCH, FL 00000 1.4 CITY - ST- ZIP GBY- \$1-20 DELETE Change Addition TITLE 2.1 TITLE GARRIS, LOUIS A 2.2 NAME MALLE 4740 S OCEAN BLVD \$18EFT ADDRESS 2.3 STREET ADDRESS HIGHLAND BCH. FL 00000 2.4 CITY-ST-ZJP OILY - \$1 - 208 DELETE Change Addition HHE 3.1 TITLE NAM: 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4. CITY - ST - ZIP CHTY- ST-ZIP DELETE Change Addition TOTALE 4.1 TITLE 4 2 NAME STREET ADORESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-SI-ZIP Addition DELETE Change 51 TITLE DILE MALIE 52 NAME 5.3 STREET ADDRESS STREET ADDRESS 54 DITY-ST-ZIP CITY ST-7.2 DELETE Change Addition 101:18 61 TILLE NAME 62 NAME **63 STREET ADDRESS** STREET ADDRESS

GNATURE: VILLE & Stern SUIS BARRIS X 2/19/97 561-342-284

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

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fual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name