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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

**FILED** 

May 05 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

IMPERI	IAL WINDOWS AND DOOR	IS, INC.								
Principal Place	e of Business	Mailing Address				-	L TOURSE THRUB REAL RECORD THE REAL CONTROL WHILE WHAT		/   <b>  </b>	
6621 19TH ST. E. P.O. BOX 605		6621 19TH ST. E. P.O. BOX 805				DO NOT WRITE IN THIS	<b>CDA∩E</b>			
TALLEVAST F	FL 34270-0805	TALLEVAST FL 34270-0805				3. Date Incorporated or Qualified				
						1	04/12/1973			
2. Principal Place of Business 2a. Mailing Ad			ddress				4. FEI Number		Ani	olied For
21		26				59-1453415	-		Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						<u> </u>		\$8.		dditional
22						•	6. Certificate of Status Desired		ee Red	-
City & State	City & State	ity & State				6. Election Campaign Financing	\$5	.00	May Be	
23		28					Trust Fund Contribution			Fees
Zip	Country	Ζφ	Cc	ountry		8	8. This corporation owes or has paid the cu	rrent ye	ar Inte	ıngibie
24	25	29	30					Yes		No
	9. Name and Address of Curre	int Registered Agent		1		10	0. Name and Address of New Registered	Agent		
CO	OLEY, W. T SR.			B1	Name					
66	21 • 19TH ST., E.			82	Street A	Address (	(P.O. Box Number is Not Acceptable)			
BR	ADENTON FL 34243									
				83						
				84	City			85	Zip C	ode
11 Purcuant	to the provisions of Sactions 607.05	in 2 and 607 1508 Florida Statut	ae tha	above	hamad	comorati	ion submits this statement for the purpose of	• Chang	ing ite	registered
office or r	egistered agent, or both, in the Stat	e of Florida, Such change was	authoriz	ed by	the corp	poration's	tion submits this statement for the purpose of s board of directors. I hereby accept the app	ointme	nt as r	egistered
agent. I a	m familiar with, and accept the obli	gations of, Section 607,0505, Fig	orida St	atutes						
SIGNATURE	Signature, typed or printed name of registered as	Ook and trig it annihoos to the lead	F · Renister	rod Acer	ot signature	rea ired wh	en reinstating) DATE		<del>_</del>	
12.		ND DIRECTORS	13	<u>``</u> _	in o grandic	regarda Min	ADDITIONS/CHANGES TO OFFICERS ANI	D DIREC	CTORS	S IN 12
TITLE	PD	DELETE	1.1 TITLE					Cha		Addition
NAME	COOLEY,W. TRACY		. 1.2 N		.2 NAME					
STREET ADDRESS	6621 19TH ST E		1.3 STREET ADDRESS		ļ					
CITY-ST-ZIP	BRADENTON FL	RADENTON FL 14		1.4 CITY - ST - ZIP		ĺ				
TITLE	\$D	DELETE 2		2.1 TITLE				Cha	inge	Addition
NAME	<b>SUTTON, DR. HAROLD S.</b>	UTTON,DR. HAROLD S.		2.2 NAME		1				
STREET ADDRESS	6621 19TH ST E			2.3 STREET ADDRESS		]				
CITY-ST-ZIP	BRADENTON FL			2.4 CITY-ST-ZIP						
TITLE	D	DELETE 3.1		3.1 TIFLE				Cha	inge	Addition
NAME	COOLEY, WILLIAM T JR.		3.2 NAME							
STREET ADDRESS	302 50TH ST W.		3 3 STREET		ADDRESS	i				
CITY-ST-ZIP	BRADENTON FL		3.4. CITY - 5		1-ZIP	<u></u>				
TITLE		☐ DELETE	4.1 TITLE					☐ Cha	nge	☐ Addition
NAME			4.2	NAME	1					
STREET ADDRESS			4.3	STREET	ADDRESS	i				
CITY-ST-ZIP			4.4	CITY-ST	I - ZIP	<u> </u>				
TITLE		☐ DELETE	5.1	5.1 TITLE				☐ Cha	nge	Addition
NAME			5.2	NAME						
STREET ADDRESS			5.3	STREET	address					
CITY-ST-ZIP			5.4 CITY-S		F- <b>2</b> IP					
TITLE		DELETE	6.1	TITLE				Cha	ınge	Addition
NAME			6.2	NAME	ŀ		•			
STREET ADDRESS			6.3	STREET	ADDRESS					
CITY-ST-ZIP			6.4	CITY-ST	1 - ZIP					

14. Thereby 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 to Block 12 or Block 13 if chapted, or on appears to the corporation with an address.