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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # F87727

(6)

ALUMINUM WROL-UP SHADES & SHUTTERS, INC.

FILED May 01 1996 8:00 am Secretary of State

|--|--|--|--|--|

Principal Place of Business Maling Address						
211 NORTHWEST 5TH AVENUE 211 NORTHWEST 5TH AVENUE HALLANDALE FL 33009 HALLANDALE FL 33009						
					3. Date Incorporated or Qualified 06/18/1982	3a. Date of Last Report 04/11/1995
2. Principal Pla	ce of Business	2a. Mailing Address			4. FEI Number	Applied For
24 Suite, Apt. #	l oto	26			NOT APPLICABLE	Not Applicable
Suite, Apt. #22:	r, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
Crty & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		-		Trust Fund Contribution	Added to Fees
. Ζφ	Country	Zip	Country	,	8. This corporation has liability for i	
24	25	29	30		Florida Statutes Yes	
	9. Name and Address of Curren	it Hegistered Agent	81	Nama 121	10. Name and Address of New R	
0114144	DV TUOI140 D		0,		LOYD PEARSON RICHM	
	.dy, thomas R. 'On & Shahady, P.A.		82	Street A	EAMP CENTER, NO TOTH	FLOOR P.A.
	E. 3RD AVENUE, SUITE 850		83			
	JDERDALE FL 33301				<u>)1 S. BISCAYNE BL</u>	VD.
11.600	SDETIDALE TE GOODT		84		IAMT	FL 85 Zip Code 33131
11. Pursuant to	o the provisions of Sections 607.0502	and 607.1508, Florida Statu	ites, the above-			pose of changing its registered office
or registere familiar with	ed agent or bath, in the state of Flore h, and second the objection of, Secti	la. Such change was authori ion 607.0505, Florida Statute	ized by the corp is	ioralion's boa -	ration submits this statement for the pur rul of directors. I hereby accept the appo	pintment as registered agent. Lam
SIGNATURE _	LAV XILL	ar often dapp श्रेणको स	Charles of Floy Of Fegure JAJO	H. Joh d Pears Tagnetore require	nnson, Vice-President son Richman, et al., f	5.A. 4/26/96
12.	7 OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	
TITLE	PD	X) DELFIE	1 1 TH LE			Change Addition
NAME	WRONO, WALTER A.		1.2 NAME			
STREET ADDRESS	211 N.W. 5TH AVENUE		1.3 STREET			İ
CITY - ST - ZIP	HALLANDALE FL	☐ DELETE	14 CITY - 5		President/CEO	X Change Addition
TITLE NAME	SDT WRONO, SHARON	☐ pereie	2 1 THILE 22 NAME	'	resident/cho	★ Change
STREET ADDRESS	211 N.W. 5TH AVENUE		2.3 STHEET	solunde.		
CITY-ST-ZIP	HALLANDALE FL		2.4 Cily - S	ST. 710		İ
TITLE	D D	☐ DELFTE	3 1 HTLF	(Corp Sec/Treas.	Change Addition
NAME	WRONO, HELEN	_	3.2 N4ME	: Fig. 5 of 18	Corp Sec/Treas 10000163 -05/21/96011	<u> </u>
STREET ADDRESS	211 N.W. 5TH AVENUE		3.3 STREE	T ADDRESS	-05/21/96011	52006
CITY-ST-ZIP	HALLANDALE FL		3 4 CITY - 9		***200.00	
TITLE	D	i Delete	4 1 TH LF	1	Director	Change 🔲 Additror
NAME	MCPHEE, BRUCE		4.2 NAME			
STREET ADDRESS	211 N.W. 5TH AVENUE		4 3 STHEE			
CITY - ST - ZIP	HALLANDALE FL	Finerer	4.4 CHY-5			- Change - Addition
THTLE		☐ DELFTE		'	Vice Pres-Acct&Fi	n.,Director Augus
NAME STREET ADDRESS			5.2 NAME 5.3 STREET		James DeGrasse	
CITY-ST-ZIP			5.4 CITY - 5		211 N.W. 5 Avenue	
TITLE		☐ DELETL	6 1 Till:		Hallandale FL	Change G Addition
NAME		_	6.2 NAMÉ		V.PManufacturin	g, Director X
STREET ADDRESS			6.3 SHEELE	ADDRESS .	Larry Verdon 211 N.W. 5 Avenue	>", N
				ST-21P 1	ZII N.W. D AVENUE	6
14. I do hereby	certify that the information supplied i	with this filing is voluntarily fur	nished and oce	s not qualify	Hallandale FL or the examption stated in Section 119.	07(3)(k), Florida Statutes. I further

•• To mercey decay that the information supplied with this annual report or supplied with 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.

SIGNATURE;

SIGNATURE AND THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/96(954)456-6979