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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **F98000002638**1. Corporation Name

ARCHITECTURAL DETAILS INTERNATIONAL, INC.

Principal Place of Business									
1134	WEST	CAMBRIDGE	CIRCLE						

Mailing Address

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90092 040 ***158.75



1134 WEST CAMBRIDGE CIRCLE KANSAS CITY KS 66103		1134 WEST CAMBRIDGE CIRC KANSAS CITY KS 66103	CLE			DO NOT WRI	TE IN THIS	SPACE_		
						05/11/1998				
2 Principal PI	lace of Rusiness	2a, Mailing Address	····			4. FEI Number		A	oplied For	
2. Principal Place of Business		26		48-1161594			lot Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		• • • • • • • • • • • • • • • • • • • •				Additional		
2		27			5. Certifcate of Status Desired	Fee Required				
City & State		City & State				6. Election Campaign Financing		•	\$5.00 May Be Added to Fees	
3		28	<u> </u>			Trust Fund Contribution		·····	to Fees	
Zip Country			Zip Country			8. This corporation owes the curr	ent year int	angible Yes	XXNo	
4 25			29 30			Personal Property Tax. 10. Name and Address of New F	Pagietared		222010	
	9. Name and Address of Curren	t Registered Agent	+	81	Name	10. Name and Address of New F	(egistereu	Agent		
MI IC	ELLER, MAX			۱,	Name					
	INTERSTATE BLVD., BLDG G		82 5		Street Addre	ess (P.O. Box Number is Not Accepta	able)			
SAM	ASOTA FL 34240		1	83						
			f	84	City		FL	85 Zip	Code	
				\perp		and a submit this statement for the		• observing if	te registered	
office or re	to the provisions of Sections 607.050/ egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was auti	nonzed	by ti	-named corpo he corporation	oration submits this statement for the on's board of directors. I hereby accep	ot the appoi	ntment as r	egistered	
SIGNATURE		ADTC D	a alabased i		nionatura requirer	d when reinstating)	DATE			
	Signature, typed or printed name of registered agent	,	13.	Ageni	signature required	ADDITIONS/CHANGES TO OF		ID DIRECT	ORS IN 12	
12.	PCD OFFICERS AN	DELETE	1,1 TITI	I F		ABBITIONS/OTIVITOES TO ST		Change		
TITLE	WASMER, PHILLIP A	_ occere	1.2 NAM					_ *	_	
NAME)	8005 ROE AVENUE				4000000					
STREET ADDRESS					ADDRESS					
City-St-ZIP	PRAIRIE VILLAGE KS	(T) DELETE	1.4 CIT		-ZIP	.	_	Change	e	
TITLE	VSTD	DELETE	2.1 1111							
NAME	BECK, WILLIAM M		2.2 NA							
STREET ADDRESS	7808 WEST 97TH STREET		2.3 STF	REET	ADDRESS					
CITY-ST-ZIP	OVERLAND PARK KS		2.4 CIT		-ZiP			Change	Addition	
TITLE		☐ DELETE	3.1 TITI			•		□ ¢uenão	_ nadition	
NAME			3.2 NA	ME						
	I									
STREET ADDRESS			3.3 STF	REET	ADDRESS					
			3.4. CIT	TY-ST					T Addition	
CITY-ST-ZIP		☐ DELETE		TY-ST			_	☐ Change	e ☐ Addition	
CITY-ST-ZIP TITLE		DELETE	3.4. CIT	TY-ST LE			<u>-</u>	☐ Change	Addition	
City-St-Zip Title Name		☐ DELETE	3.4. CIT 4.1 TITI 4. 2 NA	TY-ST LE JME				☐ Change	Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS			3.4. CIT 4.1 TITI 4. 2 NA 4.3 STF 4.4 CIT	TY-ST LE MAE REET/ Y-ST-	ADDRESS		_		,	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	3.4. CIT 4.1 TITI 4.2 NA 4.3 STF 4.4 CIT 5.1 TITI	TY-ST LE MME REET, Y-ST- LE	ADDRESS			☐ Change	, <u> </u>	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			3.4. CIT 4.1 TITI 4.2 NA 4.3 STF 4.4 CIT 5.1 TITI 5.2 NA	TY-ST LE MME REET/ Y-ST- LE ME	ADDRESS - ZIP				,	
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officer or director of the corporation or the receiver Block 12 or Block 13 if changed, or on an attachm