

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H37718 (4)

1. Corporation Name

AMERICAN ALUMINUM & INSULATION CO. OF FLORIDA, I
NC.



Principal Place of Business

Mailing Address

3144 SW 13TH DRIVE
DEERFIELD BCH. FL 33442

3144 SW 13TH DRIVE
DEERFIELD BCH. FL 33442

3. Date Incorporated or Qualified 01/11/1985	3a. Date of Last Report 04/04/1995
4. FEI Number 59-2505047	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 150 FULLING MILL ROAD
22 City & State	27 Suite, Apt. #, etc. P. O. BOX 699
23 Zip	28 City & State MIDDLETOWN, PA.
24 Country	29 Zip 17057
25	30 Country

9. Name and Address of Current Registered Agent

GOLD, AARON J
704 WEST BAY STREET
TAMPA FL 33606

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code FL

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

Signature of officer or director or registered agent or authorized representative

Signature of Registered Agent (Signature required when appointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P HILL, DAVID N. 150 FULLING MILL RD. MIDDLETOWN PA	1.1 TITLE	☐ Change ☐ Addition
NAME	S KESSEL, DEBBIE 150 FULLING MILL RD. MIDDLETOWN PA	2.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS	T WIDEL, GREGORY 150 FULLING MILL RD MIDDLETOWN PA	2.2 NAME	☐ Change ☐ Addition
CITY-ST-ZIP		2.3 STREET ADDRESS	☐ Change ☐ Addition
		2.4 CITY-ST-ZIP	☐ Change ☐ Addition
		3.1 TITLE	☐ Change ☐ Addition
		3.2 NAME	☐ Change ☐ Addition
		3.3 STREET ADDRESS	☐ Change ☐ Addition
		3.4 CITY-ST-ZIP	☐ Change ☐ Addition
		4.1 TITLE	☐ Change ☐ Addition
		4.2 NAME	☐ Change ☐ Addition
		4.3 STREET ADDRESS	☐ Change ☐ Addition
		4.4 CITY-ST-ZIP	☐ Change ☐ Addition
		5.1 TITLE	☐ Change ☐ Addition
		5.2 NAME	☐ Change ☐ Addition
		5.3 STREET ADDRESS	☐ Change ☐ Addition
		5.4 CITY-ST-ZIP	☐ Change ☐ Addition
		6.1 TITLE	☐ Change ☐ Addition
		6.2 NAME	☐ Change ☐ Addition
		6.3 STREET ADDRESS	☐ Change ☐ Addition
		6.4 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/96 717-944-0437

CR2E034 (12/95)