

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **H41081** (1)

1. Corporation Name

ENGINEERED AWNING FRAMES, INC.



Principal Place of Business

**3470 NW 7TH ST
MIAMI FL 33125**

Mailing Address

**3470 NW 7TH ST
MIAMI FL 33125**

3. Date Incorporated or Qualified

02/05/1985

3a. Date of Last Report

02/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KING, LOUIS, G
3470 NW 7TH ST
MIAMI FL 33125**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Louis G. King

Signature (Typed name of registered agent and the corporation)

(Typed Registered Agent's signature required when registering)

5/10/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PTD	☐ DELETE
NAME	KING, LOUIS G.	
STREET ADDRESS	3470 NW 7TH ST	
CITY- ST- ZIP	MIAMI FL	
TITLE	D	☐ DELETE
NAME	DIPERSICO, DALE, A	
STREET ADDRESS	520 NOTTINGHAM BLVD	
CITY- ST- ZIP	W PALM BEACH FL	
TITLE	SD	☐ DELETE
NAME	CARROLL, THOMAS F., JR.	
STREET ADDRESS	844 NW 9TH AVE	
CITY- ST- ZIP	FT LAUDERDALE FL	
TITLE	VD	☐ DELETE
NAME	WAGGENER, JACK	
STREET ADDRESS	5107 AUSTRALIAN AVE	
CITY- ST- ZIP	W PALM BEACH FL	
TITLE	D	☐ DELETE
NAME	REILLY, ROBERT M.	
STREET ADDRESS	282 NW 36TH ST	
CITY- ST- ZIP	MIAMI FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY- ST- ZIP	

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)(g), 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:

Louis G. King

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Louis G. King

5/10/96

(305) 649-4511

CR2E034 (12/95)