

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT # H41081

1. Entity Name
ENGINEERED AWNING FRAMES, INC.



Principal Place of Business
**C/O LOUIS KING
3905 NW 31 AVENUE
MIAMI, FL 33142**

Mailing Address
**C/O LOUIS KING
3905 NW 31 AVENUE
MIAMI, FL 33142**



02042004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2499200

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**KING, LOUIS, G
3905 NW 31 AVENUE
MIAMI, FL 33142**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**U00000144572
04/30/04-80137-020 150.00**

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	KING, LOUIS G.
STREET ADDRESS	3905 NW 31 AVENUE
CITY-ST-ZIP	MIAMI, FL 33142
TITLE	D
NAME	DIPERSICO, DALE, A
STREET ADDRESS	520 NOTTINGHAM BLVD
CITY-ST-ZIP	W PALM BEACH, FL
TITLE	SD
NAME	CARROLL, JAMES
STREET ADDRESS	844 NW 9TH AVE
CITY-ST-ZIP	FORT LAUDERDALE, FL 33311
TITLE	D
NAME	REILLY, MICHAEL
STREET ADDRESS	3905 NW 31 AVENUE
CITY-ST-ZIP	MIAMI, FL 33142

**DO NOT WRITE
IN THIS SPACE**

12. I hereby 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Louis G. King* **Louis G. King**

4/29/04 (305) 649-4511

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #