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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

2. Principal Place of Business

FRY, WILLIAM 9524 Majestic Way

BOYNTON BEACH FL 33437

Suite, Apt. #, etc.

City & State

9524 MAJESTIC WAY BOYNTON BEACH FL 33437

21

22

23

24

Zip

J07042

(1)

BOYNTON BEACH FL 33437

ARCHITECTURAL CAULKING, CO., INC.

Country

9. Name and Address of Current Registered Agent

, ,

Mailing Address
9524 MAJESTIC WAY

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

29

FILED Apr 10 1998 8:00am Secretary of State

•	DO NOT WRITE Date Incorporated or Qualified	E IN THI	S SPACE
٥.	04/01/1986		
4.	FEI Number		Applied For
	59-2660432		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 owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
10.	Name and Address of New Ro		d Agent

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

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.

Country

81 Name

83

30

SIGNATURE Signature, typed or printed name of registered agent and this if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. __ DELETE Change Addition 1.1 TITLE TITLE D NAME FRY, WILLIAM 1.2 NAME 9524 MAJESTIC WAY 1.3 STREET ADDRESS STREET ADDRESS **BOYNTON BEACH FL** 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 2.1 TITLE TITLE NAME FRY, ANITA 9524 MAJESTIC WAY 2.3 STREET ADDRESS STREET ADDRESS **BOYNTON BCH. FL** CITY-ST-ZIP 2. 4 CITY - ST - ZIP Change Addition DELETE 3.1 TITLE TITLE MIZERENDINO, LAURA 3.2 NAME 3677 SUNCREST ROAD 3.3 STREET ADDRESS STREET ADDRESS LAKE WORTH FL 3.4. CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST- ZIP C!TY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Change ☐ Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 DITY-ST-ZIP CITY-ST-ZIP

14. 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 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 13 if changed, or on an attachment with an address.

98 541-731-3086

HZE034 (10/97)

Zip Code