

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 # J78657 (0)

1. Corporation Name

WINDOW PROTECTION PRODUCTS, INC.

Principal Place of Business

3401 N. 29TH AVE
HOLLYWOOD FL 33020
US

Mailing Address

3401 N. 29TH AVE
HOLLYWOOD FL 33020
US

2. Principal Place of Business

2a. Mailing Address

21 SAME

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

ZAHN, RICHARD A., JR.
3050 N.E. 40 CT.
FT. LAUDERDALE FL 33308

3. Date Incorporated or Qualified

06/17/1987

3a. Date of Last Report

02/09/1995

4. FEI Number

65-0033525

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

10. Name and Address of New Registered Agent

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

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

(If DLE, Registered Agent's signature and date of registration)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

PSTD
ZAHN, RICHARD A., JR.
3050 N.E. 40 COURT
FORT LAUDERDALE FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

VD
STEPP, MERLE
12708 NW 18TH MANOR
CORAL SPRINGS FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

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TITLE NAME STREET ADDRESS CITY-STATE-ZIP

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE NAME STREET ADDRESS CITY-STATE-ZIP

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE NAME STREET ADDRESS CITY-STATE-ZIP

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE NAME STREET ADDRESS CITY-STATE-ZIP

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE NAME STREET ADDRESS CITY-STATE-ZIP

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE NAME STREET ADDRESS CITY-STATE-ZIP

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE NAME STREET ADDRESS CITY-STATE-ZIP

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

6.5 CITY-STATE-ZIP

6.6 CITY-STATE-ZIP

6.7 CITY-STATE-ZIP

6.8 CITY-STATE-ZIP

6.9 CITY-STATE-ZIP

6.10 CITY-STATE-ZIP

6.11 CITY-STATE-ZIP

6.12 CITY-STATE-ZIP

6.13 CITY-STATE-ZIP

6.14 CITY-STATE-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-22-96

305
921-7454

CR2E034 (12/95)