FILED

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **J85511**

1. Corporation Name

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

B J & M DECORATIVE FENCE WALLS, INC.

Principal Place of Business Mailing Address						
5354 CALLE FLORIDA SARASOTA FL 34242		5354 CALLE FLORIDA	5354 CALLE FLORIDA SARASOTA FL 34242			·
		SAHASOTA FL 34242				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed
						08/04/1987
2. Principal Place of Business 2a. Mailing Addr						4. FEI Number Applied For
21		<u></u>	26			65-0007406 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				\$8.75 Additional
22	.,	27				5. Certificate of Status Desired Fee Required
City & Stat	e	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Intangible
24	25	29	30			Personal Property Tax. Yes
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered Agent
				81	Name	·
COLE, R. JOHN II 1605 MAIN ST, STE 606				82	Street Add	fress (P.O. Box Number is Not Acceptable)
				L.		
SAR	ASOTA FL 34236			83		•
	,			84	City	85 Zip Code
				04	City	FL [" "
agent. I a	ım familiar with, and accept the oblig	ations of, Section 607.0505,	Florida Stati	Jtes	.	tion's board of directors. I hereby accept the appointment as registered
12.	OFFICERS AND DIRECTORS		13.			
TITLE	D	☐ DELETE	1.1 π	TLE		☐ Change ☐ Addition
NAME	GRAMMATICA, JOHN		1.2 N	WE	Ì	
STREET ADDRESS	5354 CALLE FLORIDA		1.3 ST	REE	TADDRESS .	
CITY-ST-ZIP	SARASOTA FL	ARASOTA FL 140		TY-S	T-ZIP	
TITLE		DELETE	2.1 ΤΓ	TLE		☐ Change ☐ Additio
NAME	ļ		2.2 N/	WE		
STREET ADDRESS	}		2.3 \$1	REE	TADDRESS	
CITY-ST-ZIP			2.4 C	ITY- S	ST-ZIP	
TITLE		☐ DELETE	3.1 TT	TLE		Change \ Additio
NAME			3.2 N	WE		
STREET ADDRESS			3.3 ST	REE	TADDRESS	•
CITY-ST-ZIP			3.4. C	ITY-S	ST-ZIP	
TITLE		☐ DELETE	4.1 TT	TLE		☐ Change ☐ Additio
NAME			4.2 N	AME	1	
STREET ADDRESS			4.3 ST	REE	TADDRESS	
CITY-ST-ZIP			4.4 CI	TY-S	T-ZIP	
TITLE		DELETE	5.1 TT		<u> </u>	☐ Change ☐ Addition
			52 N	ME		

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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADORESS

64 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE:

Change

☐ Addition