

2-5-98 0-1328 -L

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

FILED

Feb 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K45572 (0)
1. Corporation Name
A & A WINDOW & SCREEN, INC.

Principal Place of Business 17290 THRUSH DRIVE JUPITER FL 33458	Mailing Address 17290 THRUSH DRIVE JUPITER FL 33458
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DO NOT WRITE IN THIS SPACE


2. Principal Place of Business 21 17290 Thrush Dr.		2a. Mailing Address 26		3. Date Incorporated or Qualified 11/16/1988	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		4. FEI Number 65-0098844	
City & State 23 Jupiter, FL		City & State 28		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 24 33458		Country 25 Palm Beach		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent KERN, AUDREY G. 17290 THRUSH DRIVE JUPITER FL 33458				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				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.		(NOTE: Registered Agent signature required when reinstating)		DATE									
12. OFFICERS AND DIRECTORS								13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12							
TITLE				NAME				1.1 TITLE				1.2 NAME			
STREET ADDRESS				CITY - ST - ZIP				1.3 STREET ADDRESS				1.4 CITY - ST - ZIP			
TITLE				NAME				2.1 TITLE				2.2 NAME			
STREET ADDRESS				CITY - ST - ZIP				2.3 STREET ADDRESS				2.4 CITY - ST - ZIP			
TITLE				NAME				3.1 TITLE				3.2 NAME			
STREET ADDRESS				CITY - ST - ZIP				3.3 STREET ADDRESS				3.4 CITY - ST - ZIP			
TITLE				NAME				4.1 TITLE				4.2 NAME			
STREET ADDRESS				CITY - ST - ZIP				4.3 STREET ADDRESS				4.4 CITY - ST - ZIP			
TITLE				NAME				5.1 TITLE				5.2 NAME			
STREET ADDRESS				CITY - ST - ZIP				5.3 STREET ADDRESS				5.4 CITY - ST - ZIP			
TITLE				NAME				6.1 TITLE				6.2 NAME			
STREET ADDRESS				CITY - ST - ZIP				6.3 STREET ADDRESS				6.4 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.

SIGNATURE: 

1-29-98 525-9517

CR2E034 (10/97)