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

**PROFIT CORPORATION ANNUAL REPORT** 

1998

自身并有一个人,并有人是我们的情况是我们的意思,我们的感觉,我们的感觉,我们就是我们的一个人的人,我们也不是我们的人,我们是我们的人,我们也会会会会会会会会会会

CITY-ST-ZIP

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name K86199 (2)

BOMBAY SHUTTERS, INC.

**FILED** Apr 30 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address										103(0)		1811 BIĞIL ŞIBIL BI	PIL 01011 1001
930 CARTER RD 930 CARTER RD													
218 Winter Garden FL 34787 US				218 Winter Garden Fl 34787 US									
									_	DO NOT WRITE IN THIS SPACE			
										<ul> <li>Date Incorporated or Qualified 05/05/1989</li> </ul>			
2. Principal P	lace of Busin		2a. Mailing Address					4.	. FEI Number		A	pplied For	
21				26						59-2950070		N	ot Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5.	. Certificate of Status Desired		<b>-</b>	Additional
22				27									lequired
City & State				City & State				6.	. Election Campaign Financing	г		May Be	
Zip Country				28			. unitra		-	Trust Fund Contribution Added to			
	Country		-	-ı		ountry		8.	This corporation owes or has p			itangible	
24 25 9. Name and Address of Current				29 30 Secret Agent			T		Personal Property Tax due June 30. Yes INO  10. Name and Address of New Registered Agent				
ADAMS, ROBERT W.							81	Name				u Agoin	
2951 MARQUESAS CT													
	NDERMERE					82	Street Ac	idress (f	P.O. Box Number is Not Accepta	able)			
***	IDEI IIILI IC	1 1 02/00					83						
							84	City			F	<b>85</b> Zip	Code
office or r	egistered ad	ient, or both, in the	State of Fk	onda Such-	change was a	authoriza	ad by	the caroa	orporationation	on submits this statement for the board of directors. I hereby according	purpose opt the a	of changing ppointment as	its registered registered
	m tamiliar wi	th, and accept the	obligations	et, Section	607.0505, Fig	irida Sta	MUTOS	S.					
SIGNATURE	Signature typed	or printed name of tegiste	and some from	Ule il autilicable	INCIT	Redistric	ed Ann	nt signature re	gured who	on reinstation)	DATE		<del></del>
12.			S AND DIR			13.		, and the second		ADDITIONS/CHANGES TO OFF			RS IN 12
TITLE	D		·		DELETE	1.1	ITLE	T				☐ Change	☐ Addition
NAME	STREET ADDRESS 2591 MARQUESAS CT						1.2 NAME 1.3 STREET ADDRESS						
STREET ADDRESS													
CITY-ST-ZIP				1.4 (		CITY-S	T-ZIP						
TITLE				Ţ	DELETE	2.1						Change	Addition
NAME						2.21	IAME						
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CITY-ST-ZIP						2 4	CITY - S	ST - ZIP					
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CITY-ST-ZIP						5.4 (	HTY-SI	T-ZIP					
TITLE					DELETE	6.1 1	ITLE					Change	Addition
NAME						6.21	IAME						
STREET ADDRESS						6.3 5	TREET	ADDRESS					

14. Thereby 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 of 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.

4/24/98