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

FILED PROFIT Apr 15 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # K86943 (3) FARMONT SUNROOFS, INC. Principal Place of Business Mailing Address 2346 SUCCESS DRIVE 2346 SUCCESS DR ODESSA FL 33556 ODESSA FL 33556 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/10/1989 2. Principal Place of Business 2a. Mailing Address Applied For 26 59-2962341 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BELCHER, DALE 2346 SUCCESS DRIVE Street Address (P.O. Box Number is Not Acceptable) **ODES\$A FL 33556** 83 84 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELET**É** TITLE D۷ Change 1.1 TITLE Addition NAME **FARMONT, ROLF** 1.2 NAME STREET ADDRESS 2346 SUCCESS DRIVE 1.3 STREET ADDRESS **ODESSA FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change Addition NAME WINZKOWSKI, MICHAEL 2.2 NAME 1999 DOWNING PLACE STREET ADDRESS 2.3 STREET ADDRESS **PALM HARBOR FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE STD 3.1 TITLE Change ___ Addition NAME BELCHER, DALE 32 NAME 2346 SUCCESS DRIVE STREET ADDRESS 3.3 STREET ADDRESS ÓDESSA FL CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE Chance Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE TITLE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

11/2/ax

Change

Addition