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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K94208

(1)

UNEDA GARAGE DOOR COMPANY, INC.

FILED
Mar 31 1997 8:00am
Secretary of State

					1			I			ı				ŀ																						I			I				l		ŀ													
H	ı	ı	ı	l	ı	I	ı	۱	ı	ı	l	ļ	l,	l	ı	I	l	I	ı	l	ı	ĺ	ł	ŀ	I	l	H	ı	I	ı	Į	ı	ı	I	l	Į	Į	Į	Į	ŀ	ł	l	l	ı	Į	l	l	ļ	Į	J	l	l	l	ı	Į	I	Į	Į	ı

Principal Piace	e of Business		Ma	ailing Address				1 Manibilt at a sales brain statt abent tant			
1706 1/2 9TH S BRADENTON FL US			611	Carla Petersen 19 95th STR CIR E Adenton Fl 34202-9	N613						
05			US	-				3. Date Incorporated or Qualified 06/09/1989		ate of Last R 01/1996	eport
2. Principal Pi	race of Business		2a.	Mailing Address				4. FEI Number		Ap	plied For
21 17063	9th Street	West	26	17065 9th	Stree	et W	est	59-2957963		No	t Applicable
Suite, Apt				Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	
22			27							Fee Re	··
City & State			ļ	City & State				6. Election Campaign Financing		\$5.00	- 1
	nton, Florid		28	Bradenton,				Trust Fund Contribution		Added t	
Zip	Cour	•		Zip		Country		8. This corporation has liability for			199.032,
24 34205	25 M3 9, Name and Add	natee	29	34205	30	Man	atee	Florida Statutes L 10. Name and Address of New Re	Yes	<u> </u>	
		1888 OF CUITER	ır veğis	iterati Agent		B1	Name	IQ. Halle allu Addiese of Hew Ite	Sintai on	. vAour	
	ERSEN, CARLA					Ľ.	1421110				
	95TH ST CT E.					82	Street A	ddress (P.O. Bax Number is Not Acceptal	ole)		
Brai	DENTON FL 34202					83	ļ				
						63					
						84	City		Fl	85 Zip (Code
44			0 4 0	OZ 1500 Flexide Cie	1. 100 10	2 2 2 2 2		orporation submits this statement for the			e registered
office or r	edistered agent, or bo	oth, in the State	of Flori	da. Such change wa	as author	rized b	y the corpo	orporation submits this statement for the poration's board of directors. I hereby acce	pt the ap	pointment as	registered
agent.⊥a	ım familiar with and a	ccept the obliga	ations o	f, Section 607.0505,	Florida	Statute	S.		2 ~	· ·	,
SIGNATURE	Care	تعالم ما	Te.	Sen					المي و	6-9	
	Signature, typed or purited no	OFFICERS AN				slered Ag 13.	ent signature re	equired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AN	ID DIRECTOR	S IN 12
12.	D	OF TOERS AN	L/ L/II IL	DELETE		1.1 TITLE	T	ADDITIONO(CITATOLO TO CITA	JE1107111	X Change	Addition
NAME	PETERSEN, CARL	٨		had been		1.2 NAME					
	6119 95TH ST CT				1		ADDRESS	1706½ 9th Street West			
STREET ADDRESS	BRADENTON FL	C.						-	205		
CHY-ST-70°	D			DELETE		1.4 CITY-: 21 TITLE	31-21	Bradencon, Florida 3	1205	Change	Addition
NAME.	PETERSON, DON	ALD B		Land Deat Fo		2.2 NAME					
STREET ACORESS	6119 95TH ST CT						ADDRESS	1706% 9th Street West			
	BRADENTON FL	C.			1	2 4 CITY-		Bradenton, Florida 34	12AE		
CHTY-ST-ZIP THILE	DIMPERIORIE			☐ DELETE		3.1 TITLE	31-21	Bradenton, Florida 3	205	Change	Addition
NAMÉ						3.2 NAME	1				
STREET ADDRESS							T ADDRESS				•
						3					
CITY-ST-ZIP				DELETE		4.1 TITLE	21. Til.			Change	Addition
NAME				bul seerit		4. 2 NAME					
							ADDRESS				
STREET ADDRESS											
CHY-S1-ZIP TIBLE				DELETE		4.4 CITY- 5.1 TITLE	31"411			Change	Addition
!				had see it		5.2 NAME					
NAME EXPERT ADDRESS							T ADORESS				
STREET ADDRESS	[
CITY - S1 - 7IP	<u> </u>			DELETE	_	5.4 CITY- 6.1 TITLE	SI- ZIP			Change	Addition
TITLE				□ orreit						onengo	L FRUGRAMI
NAM:					•	6.2 NAME					
STREET ADDRESS							T ADDRESS				
C:TY - ST- ZIP	L		 			6.4 CITY-	\$7 - ZIP				

14. I do 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 altachment with an address.

SIGNATURE:

SNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

3-26-97

941-753-4386