FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

'95 MAR -1 PH 2:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L08404 (0)

1. Corporation Name
D D S DOOR SYSTEMS, INC.

Principal Place of Business	Mailing Address
218 NE FIRST AVE DELRAY BEACH FL 33444	218 NE FIRST AVE DELRAY BEACH FL 33444

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 08/10/1989
3a. Date of Last Report: 04/12/1994

2. Principal Place of Business
21 933 Mission Hill Road
Suite, Apt. #, etc.
22
City & State
23 Boynton Beach, FL
Zip 24 33435 Country 25 Palm Beach

2a. Mailing Address
26 933 Mission Hill Road
Suite, Apt. #, etc.
27
City & State
28 Boynton Beach, FL
Zip 29 33435 Country 30 Palm Beach

4. FEI Number: 65-0138316 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

GERHARDT, DAVID
218 NE FIRST AVE
DELRAY BEACH FL 33444

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 933 Mission Hill Road
83
84 City Boynton Beach FL 85 Zip Code 33435

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE		☒ Change ☐ Addition
NAME	GERHARDT, DAVID	1.2 NAME		
STREET ADDRESS	218 NE FIRST AVE	1.3 STREET ADDRESS	933 Mission Hill Road	
CITY-ST-ZIP	DELRAY BEACH FL	1.4 CITY-ST-ZIP	Boynton Beach, FL 33435	
TITLE	SVD	2.1 TITLE		☒ Change ☐ Addition
NAME	DARNELL, DIANE	2.2 NAME		
STREET ADDRESS	218 NE FIRST AVE	2.3 STREET ADDRESS	933 Mission Hill Road	
CITY-ST-ZIP	DELRAY BEACH FL	2.4 CITY-ST-ZIP	Boynton Beach, FL 33435	
TITLE	TD	3.1 TITLE		☐ Change ☐ Addition
NAME	MCDONALD, SEAN	3.2 NAME		
STREET ADDRESS	4765 NE 16TH AVE	3.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL	3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Diane L. Darnell VP Diane L. Darnell, VP 2/23/95 407-736-3311
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0207313 CP