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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 14 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L25499

(9)

Mailing Address 14352 SW 90TH ST.

MIAMI FL 33186-8010

MIAMI DOORS INC.

appears in Block 12 or Block 13 if

SIGNATURE:

Principal Place of Business

14352 SW 90TH ST.

MIAMI FL 33186

26 Suite, Apt. #, etc. Suite, Apt. #, etc. 27 City & State City & State 28 Country Zip Country Zip Country Zip Country Zip Country Zip Country Zip State City & State Size Apt. #, etc. City & State City & State City & State City & State Size Country Siz	Code its registered s registered
Suite, Apt. #, etc.    Suite, Apt. #, etc.	Additional lequired  ) May Be to Fees s. 199.032,  Code its registered s registered
City & State City & State City & State Country Zip Country Signal Xibit Statutes Ziv Yes No No Name and Address of Current Registered Agent  VDAL, IDO B. 14352 SW 90TH ST MIAMI FL 33186  Signal Xibit State Signal Xibit S	May Be I to Fees s. 199.032,  Code its registered s registered
Trust Fund Contribution Added  Zip Country Zip Country 8. This corporation has liability for invangible tax under Florida Statutes W Yes No  9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent  WDAL, IDO B. 14352 SW 90TH ST MIAMI FL 33186  82 Street Address (P.O. Box Number is Not Acceptable)  83 City FL 85 Zip  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 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 a agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature tysed or printed name of registering agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	to Fees s. 199.032, Code its registered s registered
Zip Country Zip Country 25 29 30 Florida Statutes Zip Yes No  9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent NDAL, IDO B.  14352 SW 90TH ST B2 Street Address (P.O. Box Number is Not Acceptable)  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 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 a 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	Code its registered s registered
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TITLE   L]   DELETE ■ 1.1 TITLE   L_1 Chângê	
	Addition
NAME VIDAL, IDO B. 12 NAME	
STREET ADDRESS 14352 SW 90TH ST. 1.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI FL 33186 14 CITY-ST-ZIP	
TITLE DELETE 2.1 TITLE Change	Addition
NAME AZOCAR, DULCE M. 22 NAME	
STREET ADDRESS 14352 SW 90TH ST. 23 STREET ADDRESS	
CITY-S1-ZIP MIAMI FL 33186 2 4 CITY-S1-ZIP	
TITLE DELETE 31 TITLE Change	Addition
NAME VINDELL, LUIS A. 32 NAME	
STREET ADDRESS 14352 SW 90TH ST. 3.3 STREET ADDRESS	
CITY-SI-ZIP MIAMI FL 33188 34.CITY-SI-ZIP	
TITLE D DELETE 4.1 TITLE Change	Addition
NAME VIDAL, REDENTA G. 4.2 NAME	
STREET ADDRESS 14352 SW 90TH ST. 4.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI FL 33188 44 CITY-ST-ZIP	
TITLE DELETE 5.1 TITLE Change	Addition
NAME 5.2 NAME	
STREET ADDRESS 6.3 STREET ADDRESS	
CITY-ST-ZIP 5.4 CITY-ST-ZIP	
TITLE DELETE 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 does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify the information indicated on this annual report or supplemental acquired bort is true and accurate and that my signature shall have the same legal effect as if made used in an an officer or director of the corporation or the receives or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my	it the nder oath; that