

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **L98257** (3)

1. Corporation Name

WINDOW AND WALL MAGIC INTERIORS, INC.



Principal Place of Business

**1291 S POWERLINE RD
POMPANO BEACH FL 33069-1333**

Mailing Address

**1291 S POWERLINE RD
POMPANO BEACH FL 33069-1333**

2. Principal Place of Business

2a. Mailing Address

21 **238 COMMERCIAL BLVD**

26 **3310 W Hillsboro Blvd**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 **Fort Lauderdale Fl**

28 **Deerfield Bch, Fl**

Zip

Country

Zip

Country

24 **33308-4438** 25 **Broward**

29 **33442** 30 **Broward**

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
09/04/1990

3a. Date of Last Report
05/01/1995

4. FEE Number
65-0221712

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

10. Name and Address of New Registered Agent

**HELLER, KATHIE
1291 S POWERLINE RD
POMPANO Bch FL 33062**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

238 Commercial Blvd

83

84 City **Ft Lauderdale**

FL

85 Zip **33308**

11. Pursuant to the provisions of Sections 607.0507 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 607.0507, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Registered Agent of the Corporation

Signature of New Registered Agent (Signature required to be changed)

Date of Signature

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ DELETE
SD	HUBERT, JOSEPH A.	2400 E. COMMERCIAL BLVD	FT. LAUDERDALE FL	
PD	HELLER, KATHIE	1291 S POWERLINE RD	POMPANO BEACH FL	
VD	HELLER, MICHAEL	1291 S POWERLINE RD	POMPANO BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY-ST-ZIP	☐ Change ☐ Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	☒ Change ☐ Addition
		238 Commercial Blvd	Ft Lauderdale, FL 33308	
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	☒ Change ☐ Addition
		238 Commercial Blvd	Ft Lauderdale, FL 33308	
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	☐ Change ☐ Addition
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	☐ Change ☐ Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	☐ Change ☐ Addition

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)(k), 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/4/96

CR2E034 (12/95)