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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 23 1997 8:00am

Secretary of State

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9200003720 (9)

LUMIWALL, INC.

Principal Place of Business Mailing Address						I SONDIONS EEN INTID EFMES MOTES MAIOT AND SE	60111 80108		1(1 00(1 100)		
2408 NAVAREZ SAFETY HARBO		SUITE	2519 MCMULLEN BOOTH RD. SUITE 510-133 CLEARWATER FL 34621-4173								
			US					3. Date Incorporated or Qualified 11/06/1992	11/06/1992 05/29/1996		
2. Principal Pl	ace of Business		2a. Ma	ailing Address				4. FEI Number			Applied For
21			26					59-3151913	Not Applicable		
Suite, Apt. ≀	#, etc.	├ ──¬	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Regulred	
City & State		 	City & State				. 51 3 0 3 3 5 3 3 3 3				
23			<u> </u>	28				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country		Zip Country			,	This corporation has liability for its corporation.				
24	25		29	,	30	·		· 1 **	Yes [_	0. 100.0027
		d Address of Currer		ed Agent				10. Name and Address of New Re	gistered A	gent	
WOL	FE, MICHAEL	J				81	Name				
2408			82	Street Add	ress (P.O. Box Number is Not Acceptate	le)					
SAFETY HARBOR FL 34695											
						83					
						84	City			85 Zij	p Code
						İ	'		FL		
11. Pursuant t	to the provisions egistered agent,	s of Sections 607.050 , or both, in the State and pagent the oblig	02 and 607. e of Florida.	1508, Florida Sta Such change wa action 607,0506	tutes, the a is authorize Florida Sta	above ed by stuto	e-named cor y the corpora	poration submits this statement for the parties to the parties of	urpose of the appo	changing sintment a	its registered as registered
SIGNATURE	ini iganinai wini, c	and accept the cong	anona or, o	.0000,	T IOTALA OIL	itut.	J.				
	Signature, typed or pr	rinted name of registered ag-					ent signature requ	ired when reinstating)	DATE	DIDECT	200 14 40
12.	- K	OFFICERS AN	D DIRECTO	DELETE	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	Change	
TITLE	D Wolfe, Mic	MAEL I				NAME				L Ollange	,
NAME OTREET ARROSON	2408 NAVAR						ADDRESS				
STREET ADDRESS		RBOR FL 34695									
CITY-ST-ZIP TITLE	ONLITTO	IDON'I L 04080		DELETE	2.1		ST - 7(P			Change	e Addition
NAME					- 1	MAV					-
STREET ADDRESS					2.3 5	STREET	ADDRESS				
CITY-ST-ZIP							ST-ZIP				
TITLE				DELETE		ITLE				Change	e Addition
NAME					321	NAME					
STREET ADDRESS					33	STREET	ADDRESS				
CITY-ST-ZIP					3 4.	CUA-	ST-ZIP				
TITLE				☐ DELETE	4.1	INLE				Change	e 🔲 Addition
NAME					4 2	NAME	1				
STREET ADDRESS					4.3 :	STREET	I ADDRESS				
CITY-ST-ZIP							ST-ZIP			- 1	
TITLE				☐ DELÉTE		TITLE	-			Change	e L Addition
NAME						NAME					
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP				Dougra			ST-21P			Change	e 🔲 Addilion
TITLE				☐ DELETE		TITLE				L CHANG	, LI MOUNDII
NAME						NAME	LIBBORGS				
STREET ADDRESS							I ADDRESS				
CITY-ST-ZIP	hu cortify that the	e information surplic	ed with this	filing does not a			S1-ZIP	d in Section 119.07(3)(i), Florida Statute	s. I further	certify th	at the
Informatio	on Indicated on t	this annual report or .	supplement r the receiv	tal annual report or or trusted emo	is true and nowered to	exe	urale and tha	at my signature shall have the same legant as required by Chapter 607, Florida state of the sa	il effect as	: if made i	under oath: tha