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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000008345 (0)

IPS WINDOW FASHIONS, INC.

FILED Mar 19 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					I IBAKINDE IID IDIID IIDIK DDIII DAKKE BAKIL DI	TIN OOIBI MIMB INI A	
3750 WEST 16 AVE		3750 WEST 16 AVE	3750 WEST 16 AVE				
STE 302 HIALEAH FL 33012		STE 302 HIALEAH FL 33012	STE 302		DO NOT WRITE IN THIS SPACE		
US US					3. Date Incorporated or Qualified		
					11/25/1992		
2. Principal	Place of Business	2a. Mailing Address			4. FEI Number	Ar	oplied For
21		26			65-0383086	Nk	ot Applicable
Suite, Apt	. #, e tc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional
22 City & Sta	to	27 City 8 State				Fee Re	equired
23		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00	
Zip	Country	28 Zip	Countr	v	Trust Fund Contribution 8. This corporation owes or has paid the		to Fees
24	25	29	30	•	Personal Property Tax due June 30.		No No
	g, Name and Address of Curre		1001		10. Name and Address of New Registe		
A	LVAREZ, AMADO A] B 1	Name			
	0680 SW 113TH PLACE		82	Street Add	ress (P.O. Box Number is Not Acceptable)		
STE 103							
M	IAMI FL 33176		83	3			
			84	City		85 Zip (Code
#4 Durauani	to the provisions of Postions COZ Of	00 007 4500 61 0	4464	1		PL	
office or	registered agent, or both, in the Stat	oz and 607.1508, Florida Statu e of Florida. Such change was	nes, the above authorized b	re-named corp by the corporat	poration submits this statement for the purpo- tion's board of directors. I hereby accept the	use of changing it appointment as	s registered registered
	am familiar with, and accept the obliq	gations of, Section 607.0505, F	lorida Statute)\$.		.,	_
SIGNATURE	Signatura, typed or printed name of registered as	ent and tille if applicable (NO	TE Registered Ac	ent signature requi	red when reinstating)	ATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		IS IN 12
TITLE	P	☐ DELETE	1.1 TITLE			Change	Addition
NAME	PRIETO, JOSE R JR		1.2 NAME		·		
STREET ADDRESS	3750 W 16TH AVE STE 302	2	1.3 STREE	T ADDRESS			
CITY-ST-ZIP	HIALEAH FL		1.4 CITY-	ST-ZIP		· · · · · · · · · · · · · · · · · · ·	
TITLE	VST CTAN	☐ DELETE	2.1 TITLE			☐ Change	Addition (
NAME	PRIETO, ETNI 3750 W 16TH AVE STE 302		2.2 NAME				
STREET ADDRESS CITY+ST-ZIP	HIALEAH FL			T ADDRESS			
TITLE	- MALDATTE	DELETE	2. 4 CITY- 3.1 TITLE	SI-ZIP		☐ Change	Addition
NAME			3.2 NAME			Land Ortongo	
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			3.4. DITY-				
TITLE		☐ DELETE	4.1 TITLE			☐ Change	Addition
HAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY-ST-ZIP			4.4 City-	ST-ZIP	****		
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME AVALUE ADDRESS			5.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CITY - 5	ST-ZIP		☐ Change	Addition
NAME		C pettit	6.2 NAME			TT CHAINGE	L. Moustion
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP		_	6.4 CITY - 5	1			İ
14. I hereby	certify that the information supplied v		or the exemp	tion stated in	Section 119.07(3)(i), Florida Statutes. I furthe	er certify that the	Information
officer or	on this annual report or supplement director of the corporation or the rec or Block 13 if changed, or on all atta	eiver or bestee a powered to	CINGIO GOA IN	at my cinnetin	re shall have the same legal effect as if mad uired by Chapter 607, Florida Statutes; and t	la undar anthi the	utlaman I

SIGNATURE: