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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthani

Secretary of State DIVISION OF CORPORATIONS

1996

P93000000997 (5) **DOCUMENT #** 

1. Corporation Name

DUCTS "R" US, INC.

Principal Place of I	Business	Mailing Add	tress					
3572 NW 36 TERR LAUDERDALE LAKES FL 33309			3572 NW 36 TERR Lauderdale lakes FL 33309					
					3. Date Incorporated or Qualified 01/06/1993	3a. Date of Last Report 04/28/1995		
2. Principal Place	of Business	2a. Mailing 26	Address			4. FEI Number 65-0463800		Applied For Not Applicable
Suite, Apt. #, e	etc.		opt. #, etc			5. Certificate of Status Desired		3.75 Additional Fee Required
City & State		Orty 8.5	State			6. Election Campaign Financing	_ <b>\$</b>	5.00 May Be
:3		28				Trust Fund Contribution		Added to Fees
Zip	Country	Ζιp		Country		8. This corporation has liability for		lers 199.032,
4	25	29		0			□ No	
	9. Name and Address of Cu	irrent Registered A	geni	81	Name	10. Name and Address of New F	legistered Agen	
A-n	NI 501101.16 B			61	i wai ile:			
STRATTON, DOUGLAS D 407 LINCOLN RD #2B			82 Street Add		(fress (P.O. Box Number is Not Acceptable)			
	EACH FL 33139			83				
				84	City		85	Zio Code
					,	ration submits this statement for the pur	FL.	
SIGNATURESI,jr		SANO DIRECTORS		13.	t signature require	al when residuing. ADDITIONS/CHANGES TO OFF		
TITLE	D		] DELETE	1 1 THUE			☐ Chi	ange 📋 Addition
NAME	BAKER, STEPHEN C			1.2 NAME				
STREET ADDRESS	3572 NW TERR	-1 -0.400		1.3 STREET	ADDRESS			
CITY - ST - ZIP	LAUDERDALE LAKES F			1.4 CHY-5	ST - ZIP		——————————————————————————————————————	
THE		Ĺ	] DELETE	2 1 TIFLE			□ Ch	ange
NAME				2 2 NAME				
STREET ADDRESS				2.3 STREE				
CITY-ST-ZIP TITLE			T DELETE	2.4 C/TY :	ST ZIP			ange 🗍 Addition
		L	) better	3.2 NAME			□ •	gs
NAME STREET ADDRESS					T ADDRESS			
CITY-ST-ZIP				3.4 CITY - 3				
TITLE			DELETE	4 1 HILE			☐ Ch	ange 🔲 Addition
NAME				4.2 NAME				
STREET ADDRESS				4.3 STREE	LADURESS			
CITY-ST-ZIP				4.4 CiTy	ST-ZIF			
TITLE			DELETE	5   1111.6			Ch	ange 🔲 Addition
NAME				5.2 NAME				
STREET ADDRESS				5 3 STREE	1 ADDRESS			
CHTY - ST - ZIP				5.4 CITY -	ST - 71P			
TITLE			DELETE	6.111111			☐ Ch	ange 🔲 Addition
NAME				6.2 NAME				
STREET ADDRESS				63 STREE	T ADDRESS			
CITY-ST-ZIP				64 CITY -	ST-ZIP			

14. Too 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 chapged or on an attachment with an address.

SIGNATURE:

4 /21/96 305-486-5891