

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
32399-0001

APPROVED

FILED

COMM - 1 - 1995

DOCUMENT # P93000027210 (2)

AMERICAN DOOR CO. OF MICHIGAN, INC.

TALLAHASSEE, FLORIDA

ONE N DALE MABRY
SUITE 940
TAMPA FL 33609

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TAMPA FL 33609

2. Filing Date: 04/13/1993		2a. Mailed Date: 04/13/1993		3. Filing Date: 04/13/1993		3a. Date of Last Report: 05/01/1994	
21. Filing Office: 21		26. Mailed Office: 26		4. Filing Number: 38-1422703		Applied For: Not Applicable	
22. Filing Office: 22		27. Mailed Office: 27		5. Certificate of State of Origin: []		\$8.75 Additional Fee Required	
23. Filing Office: 23		28. Mailed Office: 28		6. Election Campaign Financing Trust Fund Contribution: []		\$5.00 May Be Added to Fees	
24. Filing Office: 24		29. Mailed Office: 29		8. This corporation has adopted the Uniform System of Accounts for the Reporting of Contributions to Political Campaigns: [] Yes [] No		Florida Statutes: [] Yes [] No	
30. Filing Office: 30		31. Mailed Office: 31					

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION INFORMATION SERVICES, INC.
1201 HAYS ST
TALLAHASSEE FL 32301

81. Name:	
82. Street Address (P.O. Box Number is Not Acceptable):	
83. City:	
84. State:	FL
85. Zip Code:	

11. Pursuant to the provisions of Sections 14.07(1)(a) and 14.07(1)(b), 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 responsibilities of those set forth by Florida Statutes.

SIGNATURE

Signature of Registered Agent (Required when Applicable)

Signature of Registered Agent (Required when Applicable)

10/5

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. NAME	D ORSINO, PHILIP S	1. NAME	[] Change [] Addition
2. ADDRESS	4120 YONGE ST SUITE 402	2. ADDRESS	
3. CITY	NORTH YORK, ONTARIO	3. CITY	
4. STATE		4. STATE	[] Change [] Addition
5. ZIP		5. ZIP	
6. NAME		6. NAME	[] Change [] Addition
7. ADDRESS		7. ADDRESS	
8. CITY		8. CITY	
9. STATE		9. STATE	[] Change [] Addition
10. ZIP		10. ZIP	
11. NAME		11. NAME	[] Change [] Addition
12. ADDRESS		12. ADDRESS	
13. CITY		13. CITY	
14. STATE		14. STATE	[] Change [] Addition
15. ZIP		15. ZIP	

14. I, the undersigned, certify that this information is true and correct, and that the above named corporation is duly organized and qualified to do business in the State of Florida. I am familiar with and accept the responsibilities of those set forth by Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BORING OFFICER OR DIRECTOR