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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretify of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000029171 (4)

S & F GARAGE DOORS, INC.

	e of Business	Mailing Address			BATÉS ICAJA ÉBLAF ILANI TRABA ICÁJ IRAC
483 E 17 ST Hialeah Fl 33	010	483 E 17 ST HIALEAH FL 33010-3250			
				3. Date incorporated or Qualified 04/19/1993	3a. Date of Last Report 04/25/1996
	lace of Business	28. Mailing Address	U 54 st.	4. FEI Number	Applied For
1 983	0 5W 54 st.	26 4830 50 Suite, Apt. #, etc.	2.24.21.	65-0576371	Not Applicab \$8.75 Additional
SOILE 141.	r eac.	27		5. Certificate of Status Desired	Fee Required
City & State	Miami A	City & State	ni A.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
^{Zip} 331	65 Country	^{Zip} 33/65	Country 30		Yes No
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Reg	letered Agent
	DOMO, FERNANDO		81 Name		
9830 SW 54 ST. MIAMI FL 33165				dress (P.O. Box Number is Not Acceptable	θ)
		*.	83		
			84 City		FL 85 Zip Code
agent La SIGNATURE	ள் familiar with, and accept the obli தொண்க வல்களைகள்		lorida Statutes,	ation's board of directors. I hereby accep	DATE
2.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
itte]	D	DELETE	1.1 TITLE		Change Additi
	BANDOMO, FERNANDO		1.2 NAME		
Wit			1.2 MANIE		
	9830 SW 54 ST.		1.3 STREET ADDRESS		
REEL ADORESS	MIAMI FL 33165				
TV -SE-719	MIAMI FL 33165 D	☐ DELETE	1.3 STREET ADDRESS	·	☐ Change ☐ Addili
TREET ADDRESS ITV -SE- ZIP ILLE AME	MIAMI FL 33185 D BANDOMO, SORANGEL	☐ DELETE	1.3 STREET ADDRESS 1.4 City - St - Zip 2.1 Title 2.2 NAME		Change Additi
REET ADDRESS TYPISE ZIP FLE RAME THEES ADDRESS	MIAMI FL 33185 D BANDOMO, SORANGEL 9830 SW 54 ST.	☐ DELETE	1.3 STREET ADDRESS 1.4 City-St-Zip 2.1 Title 2.2 Name 2.3 STREET ADDRESS		☐ Change ☐ Additi
REEL ADORESS TY -SE- 719 LE RME [REEL ADDRESS TY -SE- 201	MIAMI FL 33185 D BANDOMO, SORANGEL		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
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14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 appropriate in Block 13 if chapter 607 in an attachment with an address.

6.4 CITY - ST - ZIP

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

5.3 STREET ADDRESS 5.4 City-St-Zip

SIGNATURE:

THE

THLE

STREET ADDRESS

STREET ALCIRESS

CITY: \$1-76°

CHIY+\$1-702

THE AND THEO OR PHINTED NAME OF SIGNING OFFICER OR DINECUR

DELETE

DELETE

Daytime Prone # 0114511

Change

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Addition

Addition

FILED

May 02 1997 8:00am

Secretary of State