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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9300069839 (7)

A SHADE ABOVE, INC.

5000 SW 90 CT MIAMI FL 33165	5000 SW 90 CT Miami FL 33165-6631
Principal Place of Business	Mailing Address

## FILED Feb 07 1997 8:00am Secretary of State



TV- 40-14-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-						<ol> <li>Date Incorporated or Qualified 10/07/1993</li> </ol>			
<ol> <li>Pricegal P.</li> </ol>	lace of Business	28. Mailing Address	S			4. FEI Number		<b>→</b>	Applied For
П	D	26				65-0454411		<del></del>	Vot Applicable
Suite, Apt.		Suite, Apl. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required					
City & Stat	6	City & State				Election Campaign Financing     Trust Fund Contribution			May Be
Z <sub>(p</sub>	Country 25	Ζφ <b>29</b>	30	ountry		8. This corporation has liability for Florida Statutes	intangible t		s. 199.032,
<u></u>	9. Name and Address of Curr		144	$\neg$	<del></del>	10. Name and Address of New Re		<del>-</del>	
CAS	SADO, ALI S			81	Name				
	0 SW 90 CT		82	Stroot Addre	ess (P.O. Box Number is Not Acceptab	do)			
	MI FL 33165			102	Street Addre	ess (F.O. BOX Number is Not Acceptat	леј		
				83					
				84	City	***************************************	FL	<b>85</b> Zip	Code
office or r	egistered agent, or both lin the Sta im familiar with, and accept the obl	ite of Florida. Such change ligations of, Section 607.05	e was authoriz 505, Florida St	zed by tatutes	the corporati	oration submits this statement for the p ion's board of directors. I hereby accep	ot the appo	intment a	s registered
	Support and type of our paints of mone or veg sterior a				nt signature require	ed when reinstating)	DATE	A SEAT	50 11 40
2.	OFFICERS A	AND DIRECTORS  DELE	13	TITLE	<del></del>	ADDITIONS/CHANGES TO OFFIC	ERS AND	Change	
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1 of nereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. If 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 exportation or the exercise empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed for an application or an address.

SIGNATURE: