SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000075161 (8)

## ALL-BRITE ALUMINUM & VINYL, INC.

Principal Place of Business 760 C. GREENSBORO ROAD

Mailing Address

760 C. GREENSBORO ROAD

## **FILED** Oct 07 1998 8:00am Secretary of State



COCOA FL 32926 COCOA FL 32926 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/29/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 <del>59-3206897</del> Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Zip Country Zip Country 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CARTER, ROBERT M 1233 HIGHLAND ACRES RD Street Address (P.O. Box Number is Not Acceptable) APOPKA FL 32703 83 84 City Zip Code 11. Pursuant to the provisions of sections 607.0502 and 607.1508, 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 obligations of, section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. TITLE 1.1 TITLE L\_ DELETE Change Addition CARTER, ROBERT M 1 2 NAME NAME 1233 HIGHLAND ACRES RD STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP APOPKA FL 32703 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition CARTER, ELIZABETH K NAME 2.2 NAME 1233 HIGHLAND ACRES RD 2.3 STREET ADDRESS STREET ADDRESS APOPKA FL 32703 2.4 CITY-ST-ZIP CITY-ST-ZIP 3.1 TITLE DELETE Change Addition NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP 5.1 TITLE \_\_ Change \_\_ Addition TITLE DELETE NAME

14. I hereby certify that the information supplied with this filing 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 supplied that 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 epoil as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an artifess.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

STREET ADDRESS

CITY-ST-ZIP TITLE

CITY-ST-ZIP

NAME STREET ADDRESS

\_\_ Change \_\_ Addition