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

**PROFIT** , CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

199		ALTERNATION CONTRACTOR OF THE PROPERTY OF THE		F CORPOR	ATIO	ONS						
OCUME Corporation Nam	NT # <b>P93</b> 0 WINDSOR REFIN	00008789	•	3)				<u></u>				
HOUSE OF	WINDSON NECIN	ISHING CO. INC.										
rincipal Place of Bu	Isiness	Mailing Add	iress						III <b>ii</b> ih	BBAR UUTUI IUII		
3400 S TAMIAMI TRAIL 3400 S TAMIAMI TRAIL												
301 301 SARASOTA FL 34239 SARASOTA FL 34239												
US					3. Date Incorporated or Qualified 12/17/1993			3a. Date of Last Report 05/01/1995				
Principal Place of	Business	h	2a. Mailing Address				4. FEI Number 65-0459879			Applied For Not Applicate		
Suite, Apt. #, etc.		Suite, Ap	pt. #, <b>e</b> tc.					5. Certificate of Status Desi	ed			.75 Additional
Orty & State		City & Si	tale					6. Election Campaign Finan	cing			ee Required .00 May Be
	Country	28						Trust Fund Contribution				ded to Fees
Zφ	Country <b>25</b>	Z <sub>I</sub> p <b>29</b>		30	ıntry		1	<ol> <li>This corporation has liabilities</li> </ol>		ntangible tax	unde	ers 199,032,
9.	Name and Address of C		ent				1	0. Name and Address of			gent	
	AMI TRAIL SUITE 301				82	Street A	Address	P.O. Box Number is Not Ac	ceptab	le)		
SARASOTA F	FL 34239				83				· · · · · ·			
					84	City				FL	85	Zip Code
familiar with, and SNATURE	of accept the obligations of	, Section 607,0505, Flo	rida Statute	ROTE: Rugisteres				····-		DATE		
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	542 46TH AVE. W.			1.3 S	IREET	ADDRESS	574	42 Forester Pin	ne C	ourt		
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14. I do 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 cert by 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 cath, that I am an officer or director of the conversion 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 changed or on an attachment with an address.

6.4 CITY - ST - ZiP

SIGNATURE:

011Y - S1 - **Z**IP

John Dendy, Director