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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1. Corporatio	MENT # P94000 I'S DOORS INC.	024268				
Principal Plac	e of Business	Mailing Address		1 105 1100) IS SELLE GIVES DOLLE GOING BOWN	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,
1325 WINDSOR	NR .	1325 WINDSOR DR				
CLEARWATER F		CLEARWATER FL 34616				
US		US		DO NOT WRITE IN TI	HIS SPACE	
li .				 Date Incorporated or Qualified 03/25/1994 		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		59-3228448	Not Applicab	ole
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional	
22		27		a. Certificate of Status Desired	Fee Required .	
City & Stat	e	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year	Intangible	
24	25	29	30	Personal Property Tax.	Yes ZHo	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Register	ed Agent '	_
ADC	HED BOMBIE C		81 Name			
ARCHER, BONNIE S.			82 Street Add	ress (P.O. Box Number is Not Acceptable)		
1325 WINDSOR DRIVE CLEARWATER FL 04610* 3375 6						
CLE	ANWAIER FL 04010		83			
	-		84 City		L 85 Zip Code	
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State or familiar with, and accept the obligating the second of the second section of the second second second second second second second second sec	of Florida. Such change was autons of, Section 607,6505, Florid	horized by the corporati	poration submits this statement for the purpose on's board of directors. I hereby accept the appearance of the purpose of the purpose on's board of directors. I hereby accept the appearance of the purpose of the purp	of changing its registered pointment as registered 7/99	1
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE	·	Change Addit	tion
NAME	ARCHER, DONALD M		1.2 NAME			
STREET ADDRESS	414 TURNER ST		1.3 STREET ADDRESS			
CITY-ST-ZIP	CLEARWATER FL 34616		1.4 CITY-ST-ZIP			
TITLE	\$	☐ DELETE	2.1 TITLE		Change Addit	tion
NAME	ARCHER, BONNIE S.		2.2 NAME			
STREET ADDRESS	1325 WINDSOR DRIVE		2.3 STREET ADDRESS			
CITY-ST-ZIP	CLEARWATER FL		2. 4 CITY-ST-ZIP	4 .4	<u> </u>	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addit	tion
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change Addit	üon
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP	. <u> </u>		
TITLE		☐ DELETE	51 TITLE		☐ Change ☐ Addit	uon
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS		•	
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addit	3OU
NAME			6.2 NAMÉ			

CITY-ST-ZIP 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 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 appears in Block 12 or Block 13 if changed, or on an attachment with) an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS