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PROFIT CORPORATION ANNUAL REPORT	FLORIDA DEPARTMENT OF STATE KALOMERIS, PAUL Secretary of State DIVISION OF CORPORATIONS
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FILED

00 AUG -4 AM 8:34

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P94000057016

1. Corporation Name

ULTIMATE SCREEN, CO.

Principal Place of Business

651 SE 8TH AVE
POMP.BCH. FL 33060

Mailing Address

651 SE 8TH AVE
POMP.BCH. FL 33060

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 840 NE 46 CT	26 840 NE 46 CT
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State Ft. Lauderdale FL	28 City & State Ft. Lauderdale FL
24 Zip 33334 Country USA	29 Zip 33334 Country USA

3. Date Incorporated or Qualified

08/02/1994

4. FEI Number

65-0614948

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation owes the current year Intangible
Personal Property Tax.Yes ☐ No ☒

9. Name and Address of Current Registered Agent

KALOMERIS, PAUL
651 SE 8TH AVE
POMP.BCH. FL 33060

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
840 NE 46 CT

83

84 City

Ft. Lauderdale FL

FL

85 Zip Code
33334

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)

DATE

4-5-99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KALOMERIS, PAUL	1.2 NAME	840 NE 46 CT
STREET ADDRESS	651 SE 8 AVE	1.3 STREET ADDRESS	Ft. Lauderdale FL 33334
CITY-ST-ZIP	POMPANO BCH FL 33060	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	200003368132
STREET ADDRESS		3.3 STREET ADDRESS	-08/23/00--01019--006
CITY-ST-ZIP		3.4 CITY-ST-ZIP	***\$550.00 ***\$550.00
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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.

SIGNATURE:

Paul Kalomeris
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-5-99

Date

954-788-8076

Daytime Phone #

CR2E034 (11/98)

 THE ULTIMATE SCREEN CO.

840 N.E. 46TH Ct.
FT. LAUD., FL. 33334

Phone:(954)776-7022
Fax:(954)776-7743

To: Division Of Corporation

7-3-00

Fr: Ultimate Screen Co.

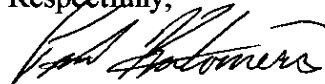
Re: Annual Report Doc # P94000057016

As per my conversation with Leslie I've enclosed \$550.00 to bring the Annual Report current. The amount of Four Hundred Dollars late fee for year 1999 and One Hundred Fifty Dollars for year 2000.

I explained that I never received the late fee notice so she waived the reinstatement fee.

I appreciate the help I received over the phone.

Respectfully,



Paul Kalomeris
President