**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9400060501

1. Corporation Name					·		
SOUTH	VEST WINDOW AND DOOF	1 INC.	•		1 (48)(48)(110 (8)() 810() 810() 810() 86()( 86()(	1881 <b>0 (</b> 881) ( <b>8810</b> ) <b>(</b> 881) (8	I B 1 8 1 1 8 B 1
Principal Place	e of Business	Mailing Address			.BISS BINK BRIDI BINK B	.elel 1161 (89)	
5324 COLONY COURT		13300-56 S. CLEVELAND AVE.					
CAPE CORAL FL 33904		MSC 302 FT. MYERS FL 33907			DO NOT WRITE IN THIS SPACE		
		US			3. Date Incorporated or Qualifed		
					08/26/1994		
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Apr	olied For	
21		26	26		~~65-0516503		Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	
22		27	City & State			Fee Rec	<u> </u>
City & State		28		6. Election Campaign Financing  Trust Fund Contribution	\$5.00 i Added to		
Zip Country		Zip Country		This corporation owes the current year			
24	25	29	30		Personal Property Tax.		□No _
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registe	red Agent	
ACURE DE DIGITADO M				81 Name		-	
SCHREIBER, RICHARD W			ľ	82 Street Ad	dress (P.O. Box Number is Not Acceptable)	_	
5324 COLONY COURT CAPE CORAL FL 33904			ļ.				
Į CAF			83				
				84 City		85 Zip C	ode
11 Durauant	to the provisions of Sections 607.05	02 and 607 1508 Florida Si	tatutes the ah	ove-named co	rnoration submits this statement for the nurros	e of changing its	registered
office or r	registered agent, or both, in the State	of Florida, Such change w	as authorized	by the corpora	tion's board of directors. I hereby accept the a	ppointment as reg	jistered
Į.	m tamiliar with, and accept the oblig	ations of, Section 607.0505.	, riunua Siaiu	ies.			
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (	NOTE: Registered A	Agent signature requ	ired when reinstating) DAT	Ē.	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	PTD	☐ DELETI	E 1.1 TITL	Æ		☐ Change	Addition
NAME	SCHREIBER, RICHARD W.		1.2 NAM	MÉ			
STREET ADDRESS	5324 COLONY COURT			REET ADDRESS			
CITY-ST-ZIP	CAPE CORAL FL	☐ DELETI		Y-ST-ZIP		Change	Addition
TITLE	1		2.1 IIIL	Į.		s.i.a.i.go	
NAME STREET ADDRESS	-	السواحات ولادا شودات		REET ADDRESS	المستواد الشاب المستواد المستواد		
CITY-ST-ZIP				Y-ST-ZIP			
TITLE		☐ DELET				Change	☐ Addition
NAME			3.2 NAA	vrE		•	
STREET ADDRESS			3.3 STR	REET ADDRESS			
CTTY-ST-ZIP			3.4. CIT	Y-ST-ZIP			
TITLE		DELETI	E 4.1 TM	Æ		☐ Change	☐ Addition
NAME			4. 2 NA	ME			
STREET ADDRESS			4.3 STF	REET ADDRESS			
CITY-ST-ZIP		·		Y-ST-ZIP		Charte	
TITLE		☐ DELETI	E 5.1 TITL 5.2 NAA			Change	☐ Addition
NAME				REET ADDRESS			
STREET ADDRESS				Y-ST-ZIP			
CITY-ST-ZIP		☐ DELÉTI				Change	☐ Addition
TITLE	930	Ŭ neren	62 NAM			□ ourninge	

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 employered 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 ADDRÉSS

CITY-ST-ZIP

FILED Apr 12, 1999 8:00 am Secretary of State 04-12-1999 90010 005 \*\*\*150.00