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PROFIT CORPORATION ANNUAL REPORT

1998



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P94000063173 (6)

AMERICAN WINDOWS & STORM PANELS, CORP.

Principal Place of Business

Mailing Address

APPROVED AND FILED

98 APR 24 PM 1: 10

SECRETARY OF STATE TALLAHASSEE, FLORIDA



2300 CORAL WAY 2300 CORAL WAY #200 DO NOT WRITE IN THIS SPACE MIAMI FL 33145 MIAMI FL 33145 3. Date Incorporated or Qualified 08/26/1994 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-05 15629 Not Applicable 2300 CORAL WAY 26 2300 CORAL WAY \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required SUITE #200 SUITE #200 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 MIAMI, FLORIDA 28 MIAMI, FLORIDA 8. This corporation owes or has paid the current year Intangible 30 U.S. Yes Yes 33145 25 U.S. 29 33145 Personal Property Tax due June 30. 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name FLORIDA ANNUAL REPORT SERVICES INC. 2300 CORAL WAY 82 Street Address (P.O. Box Number is Not Acceptable) #200 83 **MIAMI FL 33145** 84 City 85 Zip Code d 607 1508 Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered to this. Such change was authorized by the corporation's hoard of directors. I hereby accept the appointment as registered as d Seyton 607 0505, Florida Statulos. Pursuant to the r agent AMADA CANTERA LOPEZ/PRES. SIGNATU ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. FIGERS AND DIRECTORS 13. Change Addition DELETE 1.1 TITLE TITLE DEL VALLE, NORMAN NAME 1.2 NAME 000002504010--6 -04/28/98--01122--004 7201 S.W. 102ND STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33173 CITY-ST-ZiP 1.4 CITY-ST-ZIP ****150,00 DELETE 21 11TLE TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 3.1 THILE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS QITY-ST-ZIP 3.4. CHY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-2IP DELETE Addition Change TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-7IP CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). 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 eath; 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.