FILE NOW: FILING FEE AFTER MAY 1 18 \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

1996	CO WE IN	DIVISION OF CORPORATIONS								
DOCUMENT # P9400078526 (8) 1. Corporation Name FIBERGLASS SOLUTIONS INTERNATIONAL, INC.										
PIDENGE GOLOTA										
Principal Place of Business		ling Address								
11000 LIETDO DADIGUAY CHITE 2	11	IOOO METRO PARKWAY SHITE 20								



11000 USTDO		Mailing Address			1		
11000 METRO PARKWAY SUITE 20 Ft. Myers fl 33912			11000 METRO PARKWAY SUITE 20 FT. MYERS FL 33912				
71. m12.10 12					3. Date Incorporated or Qualified 10/26/1994	3a. Date of L 05/2	Last Report 3/1995
. Principal Plac	re of Business	2a. Mailing Address			4. FEI Number	-1	Applied F
Fillicipal Fiac	Se of Eddinose	26			65-0532149		Not Appl
Suite, Apt. #,	etc.	Suite, Apt. #, etc			5. Certificate of Status Desired	\$	8.75 Addition
,		27			S. Commerce of Cataly Desired		Fee Required
City & State		City & State			6. Election Campaign Financing		\$5.00 May E
l		28			Trust Fund Contribution		Added to Fee
Zip	Country	Ζφ	Country	y	This corporation has liability for I Ftorida Statutes Yes	ntangible tax ui No	nders 199.032
	25	29	30		10. Name and Address of New R		ent
	9. Name and Address of Curr	rent negistered Agent	81	Name			
WHITENE	R, MICHAEL D		ļ		(D.C. Flanklander in Not Apportate	do)	
	ETRO PARKWAY SUITE 20		82	Street Add	ress (P.O. Box Number is Not Acceptab	nej	
	RS FL 33912		83	3			
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				ļ		Т	35 Zip Code
			84	City		FL '	35 Zip Code
IGNATURF	Syrichiae, typical or proded name of registered as	<u></u>	(NOTE: Registered Au	ent Signal ire fedure		DATE	DECTORS IN 1
2.	OFFICERS .	AND DIRECTORS	13.	- ····	ADDITIONS/CHANGES TO OFF		
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Four neterity certify that the information supplied whit unis ling is voluntarily turnished and does not qualify for the exemption stated in Section 1.19.07(a)Ry, Florad Statutes. Industried certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under out that I am an officer or discort of the corporation or the retreiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 11 if changed, or on an attachment with an address.

SIGNATURE: