FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

14. I do hereby certify that the information s information Indicated on this annual rep I am an officer or director of the corpor appears in Block 12 or Block 13 if ching

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 13 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State • DIVISION OF CORPORATIONS

DOCUMENT # P9500003530 (9)

BLAIRE WINDOW & SCREEN, INC.

Principal Place of Business Mailing Address 833 E. SAMPLE RD. 533 E. SAMPLE RD. POMPANO BEACH FL 33084 POMPANO BEACH FL 33064-4425 3. Date Incorporated or Qualified 3a. Date of Last Report 01/12/1995 05/10/1996 2, Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3335977 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Źω 8. This corporation has liability for intangible tax under s. 199.032. 24 25 Yes No 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent REED, DEBORAH 81 8270 SW 7744CT. 82 N. LAUDERDALE 83 84 Derel 11. Pursuant to the provisions office or registered agent, agent. I am familiar with, 8. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered on change was authorized by the corporation's board of directors. I hereby accept the appointment as registered ion 607.0505, Florida Statutes. SIGNATURE Registered Agent signature required when reinstating) 12. FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) DELE TE TITLE DREMAN 11 TITUE Change Addition BLAIRE, STEPHEN M NAMF 1.2 NAME 330 SW 31ST AVE. STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 33312 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 21 TITLE Change Addition NAME REED. DEBORAH L 2.2 NAME 8270 SW 7TH CT. STREET ADDRESS 2.3 STREET ADDRESS N. LAUDERDALE FL 33608 CITY-ST-ZIP 2. 4 City - St - ZIP DEL E1E TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELFTE TITLE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CHY-S1-ZIP DELETE TITLE Addition 5.1 TITLE Change NAME 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-\$1-ZIP DELETE TITLE 61 Inte Change Addition NAME 62 NAME

6.3 STREET ADDRESS

uplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the type supplemental annual rend to strue and accurate and that my signature shall have the same legal effect as if made under oath; that for the receiver or type grapolyered to execute this report as required by Chapter 607, Florida Statutes; and that my name