Applied For

Fee Required \$5.00 May Be

Added to Fees

Not Applicable \$8.75 Additional

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # DOE

1. Corporation Name PRO-TEC COVERS, INC.	9000011339		`			
Principal Place of Business	Mailing Address	_	_			\$ 100,11001 110 t0 161 0 161 0 00 111 00
2310 HAYES STREET HOLLYWOOD FL 33020	2310 HAYES STREET HOLLYWOOD FL 33020					DO NOT WRI
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2. Principal Place of Business	2a. Mailing Address				4.	FEI Number
21	26		_		<u>.</u>	65-0576883
Suite, Apt. #, etc.	Suite, Apt. #, etc.		_	_	5.	Certifcate of Status Desired
City & State	City & State				6.	Election Campaign Financing Trust Fund Contribution
Zip Count	try Zip	Country 30	,		8.	This corporation owes the curr Personal Property Tax.
	ress of Current Registered Agent		_		10.	Name and Address of New F
ALBERTINE, MICHAEL C 2200 W COMMERCIAL I)	81 82		Name Street Addre	ss (P	.O. Box Number is Not Accepta
SUITE 301	333-00	83				

FILED Mar 25, 1999 8:00 am Secretary of State

03-25-1999 90050 019 ***150.00



DO NOT WRITE IN THIS SPACE

9. Name and Address of Current Registered Agent ALBERTINE, MICHAEL O 2200 W COMMERCIAL BLVD SUITE 301 FT LAUDERDALE FL FL333-09 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Floride Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such changes authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and the state of Florida. Such changes authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I aministry with and care of registered agent and the if applicable. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. NAME 12. NAME 13. TITLE 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. TITLE 15. STREET ADDRESS 15. TITLE 16. Change 16. Change 16. Change 17. ST.2P 18. Zip Code 19. Addition 19. Name and Address of New Registered Agent 19. Name and Address (P.O. Box Number is Not Acceptable) 19. Street Address (P.O. Box Number is Not Acceptable) 19. Street Address (P.O. Box Number is Not Acceptable) 19. Street Address (P.O. Box Number is Not Acceptable) 19. Street Address (P.O. Box Number is Not Acceptable) 19. Street Address (P.O. Box Number is Not Acceptable) 19. Street Address (P.O. Box Number is Not Acceptable) 19. Street Address (P.O. Box Number is Not Acceptable) 19. Street Address (P.O. Box Number is Not Acceptable) 19. Street Address (P.O. Box Number is Not Acceptable) 19. Street Address (P.O. Box Number is Not Acceptable) 19. Street Address (P.O. Box Number is Not Acceptable) 19. Street Address (P.O. Box Number is Not Acceptable) 19. Street Address (P.O. Box Number is Not Acceptable) 19.	Zip	Country	Zip	'	Country		8. This corporation owes the	ne current year Inta		
ALBERTINE, MICHAEL O 2200 W COMMERCIAL BLVD SUITE 301 FT LAUDERDALE FL FL333-09 44 City FL & State Address (P.O. Box Number is Not Acceptable) 38 Test Address (P.O. Box Number is Not Acceptable) 39 Test Address (P.O. Box Number is Not Acceptable) 40 City FL & State Address (P.O. Box Number is Not Acceptable) 41. Pursuant to the provisions of Socions 607 0502 and 607.1508, Florids 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 Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florids. Statutes, the above-named corporation submits this statement for the purpose of changing is registered office or registered agent, or both, in the State of Florids. Statutes, the above-named corporation submits this statement for the purpose of changing is registered office or registered agent, or both, in the State of Florids. Statutes, the above-named corporation submits this statement for the purpose of changing is registered office or registered agent, or both, in the State of Florids. Statutes, the appointment as registered office or registered agent, or both, in the State of Florids. Statutes, the appointment as registered office or registered agent, or both, in the State of Florids. The appointment as registered office or registered agent, or both, in the State of Florids. The appointment as registered office or registered agent, or both, in the State appointment as registered office or registered agent, or both, in the State appointment as registered office or registered agent, or both in the appointment as registered office or registered agent, or both in the state appointment as registered or registered agent, and the state appointment as registered agent, and the state appointment as registered agent, and the state appointment as registered or registered agent, and the state appointme	24	25	29	30					Yes	□No
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, above-named corporation submits this statement for the purpose of changing its 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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE Signature, hyped or printed wave or inspirated apen and ties if poplicable. (NOTE: Registered Agent signatures required when remarkable) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE D SHOSSEAU, JUDITH 12. NAME 13. STREET ADDRESS CITY-ST-ZP TITLE D Change Addition Addition 14. CITY-ST-ZP TITLE D CHANGE 13. TITLE C Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition Addition Addition Addition Addition Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition Addition Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition Addition Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition Addition Addition Addition Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition	FT i	LAUDERDALE FL FL333-09			1					
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	44 I bereby	certify that the information supplied with	this filing does not	qualify for the	exempt	ion stated in S	ection 119.07(3)(i), Florida Sta	tutes. I further cer	tify that the	e information

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: