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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000039986 (1)

Principal Place of Business	Mailing Address		
234 SW 25TH RD	234 SW 25TH RD		
MIAMI FL 33129	MIAMI FL 33129		

FILED Mar 25 1998 8:00am Secretary of State

BACH	'S HOME IMPROVEMENT	rs, INC.			
Principal Place	e of Business	Mailing Address		4 INDICANT THE SPINI BUSH BUSH BUSH BUSH BUSH	199 01148 18119 SP191 F914B 1811 1891
234 SW 25TH RD 234 SW 25TH RD MIAMI FL 33129 MIAMI FL 33129			DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified	
				05/15/1995	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# atc	26 Suite, Apt. #, etc.		65-0582225	Not Applicable \$8.75 Additional
22	п, вко	27		5. Certificate of Status Desired	Fee Required
City & State	θ	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zıp	Country	Zip	Country	8. This corporation owes or has paid the	
24	25		30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Cur	rent Hegistereo Agent	81 Name	10. Name and Address of New Register	ed Agent
	ACH, ROGER				
	34 S W 25TH RD IAMI FL 33129		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
PA1	IMMI FL 33128		83		
			84 City		85 Zip Code
office or ri agent. I ai SIGNATURE.	to the provisions of Sections 607.1 or ogistered agent, or both, in the St in familiar with, and accept the of Signature, typed or printed name of registered	ate of Horida. Such change was au oligations of, Section 607.0505, Flor	s, the above-named corp thorized by the corporational Statutes. Registered Agent signature requires	oration submits this statement for the purpos ion's board of directors. I hereby accept the	appointment as registered
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	DP	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BACH, ROGER		1.2 NAME		
STREET ADDRESS	234 SW 25TH RD		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33129		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2 1 THTLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	2. 4 CITY - ST - ZIP		Change Adulti-
TITLE		L DELETE	3.1 TITLE		Change Addition
NAME OTOTET ADDRESS			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4 CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		Petric	4. 2 NAME		The street of th
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETÉ	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			54 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CfTY - ST - ZIP	Section 110 07/2Vi) Florida Statutas Liutha	

I hereby certify that the information supplied with this filling 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 is 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 scoler 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 an an attachment with an address

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