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 # **P95000044535**

BOCA RATON FL 33496

WEATHER BLOCK SHELTERS	S USA, INC.
Principal Place of Business	Mailing Add
123 NW 13TH ST., SUITE 310	123 NW 13T

123 NW 13TH ST., SUITE 310 **BOCA RATON FL 33496**

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90265 026 ***150.00



DO NOT WRITE IN THIS SPACE

				3. Date Incorporated or Qualifed 06/08/1995		
a Principal Pla	ace of Business	2a. Mailing Address	 	4. FEI Number	Applied For	
			33 STROET	000000000	Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.	95 3,7201	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
22		27				
City & State	paro Deach FL	City State 28 OMPANO Bene		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip /	Country	This corporation owes the current year Inta		
24 330	64 25 DROWARD	29 13064 30	BLOWARD	Personal Property Tax.	☑Yes □ No	
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
BOOF MILES			KOSE MILLER			
ROSE MILLER			82 Street Ac	idress (P.O. Box Number is Not Acceptable)		
125 144 1551			-::-5(1701 NW 33 STROCT		
	STE 310 83					
BOC	A RATON FL 3432		ļ		Tes Zin Codo	
			84 City	POMDANO DEACH FL	85 Zip Code 33064	
44 Burguest	to the provisions of Sections 607 0502	and 607 1508 Florida Statutes	the above-named co	exporation submits this statement for the nurnose of	changing its registered	
office or re	edistered agent or both in the State o	f Florida. Such change was autr	norizea by the corpora	ation's board of directors. I hereby accept the appoir	ntment as registered	
agent. I ar	m familiar with, and accept the obligati	ons of, Section 607.0505, Florid	a Statutes.			
SIGNATURE		NOTE D	egistered Agent signature requ	DATE		
	Signature, typed or printed name of registered agent OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12	
12.	D OTTICERS AND	DELETE	1.1 TITLE	Nilsettal	Dange Addition	
TITLE	MILLER, ROSA		1.2 NAME	MILLER, ROSE 1701 NW 33 STREET POMPANO BERM, FC 33064		
NAME	123 NW 13TH ST. #310			1701 NIW 33 STREET		
STREET ADDRESS			1.3 STREET ADDRESS	Proce 3 El 330/14		
CITY-ST-ZIP	BOCA RATON FL 33432		1.4 CITY-ST-ZIP	POM PINO DESCH, 10 33047	☐ Change ☐ Addition	
TITLE		☐ DELETE	2.1 TITLE			
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		<u> </u>	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME			32 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
			3.4. CITY-ST-ZIP			
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition	
			4. 2 NAME			
NAME			L			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP		☐ DELETE	4.4 CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE		□ offere	5.1 TITLE		C change C hadriott	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME .			6.2 NAME			
STREET ADDRESS	• • •		6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			
UITTOTALF						

14. I hereby certify that the information supplied with this filing 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 or 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 copporation 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:

MOJE MILLER