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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000047060 (5)

ACCURATE ALUMINUM & ADDITIONS INC.

Principa	Place	of	Business
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Mailing Address

3236 PAINTERS STREET SPRING HILL FL 34606

3236 PAINTERS STREET SPRING HILL FL 34606-2815

FILED May 12 1997 8:00am Secretary of State



(352)

						3. Date Incorporated or Qualified
2. Principal Pla	ace of Business	3	2a. Mailing Addres	S		4. FEI Number Applied For
21		·	26		·	56-3322953 Not Applicable
Sulte, Apt. #			Suite, Apt. #, et	c.		5. Certificate of Status Desired See Required Fee Required
City & State) 		City & State		7. danska	6. Election Campaign Financing \$5.00 May Bo Trust Fund Contribution Added to Fees
Zip 24	25	Country	7ip 29	30	intry	8. This corporation has liability for intengible tax under s. 199.032, Florida Statutes Yes No
		d Address of Curre	nt Registered Agent			10. Name and Address of New Registered Agent
3236	I, DONNA M B PAINTERS S				81 Name 82 Street A	Address (P.O. Box Number is Not Acceptable)
SPRING HILL FL 34806				83		
			F		B4 City	FL 85 71p Code
office or re	egistered agent	, or both, in the State	02 and 607.1508, Florida c of Florida. Such chango pations of, Section 607.05	was authorized	d by the corpo	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or p	rinted name of registered ag	eklapiliqe il entit bre trop	(NOTE: Registere	1 Agent signature n	required when reinstaing) DATE
12.		OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD		DELE]E 1.1]]	1LF	☐ Change ☐ Additio
NAME	LAIN, DONN			1.2 N /	AME .	
STREET ADDRESS		ers street		1.3 \$1	REET ADDRESS	
CITY-ST-ZIP	SPRING HIL	L FL 34606		1.40	1Y-S1- <i>2</i> IP	
TITLE	DV		☐ DELF	TE 2.1 TI	ILE	☐ Change ☐ Addilio
NAME	LAIN, NORM			2.2 N	AME	
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CITY-ST-ZIP	SPRING HIL	L FL 34606		2.40	11Y-ST-7/P	
TITLE			☐ DELF	TE 31TH	ILE	Change Additio
NAME				3.2 N/	MI.	
STREET ADDRESS				3.3 \$	REE1 ADDRESS	
CITY-ST-ZIP	,			3.4. C	17Y-S1-ZIP	
TITLE			☐ DEFE	TE 4.1 TI	TLE .	Change Additio
NAME				4.2 N	AME	
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CITY-ST-ZIP				4.4 C	1Y-S1-ZIP	
TITLE			DELE	TE 5.1 Tr	TLE.	Change Additio
NAME				5.2 N	AME]	
STREET ADDRESS				5.3 \$	REE1 ADDRESS	
CITY-ST-ZIP				5.4 CI	1Y-S1-ZIP	
TITLE			DELF			Change Additio
NAME				62 N	AME	· -
STREET ADDRESS					REET ADDRESS	
CITY-ST-ZIP					IY-SI-ZIP	
14. I do hereb Information I am an of	n indicated on t ficer or director	his annual report or of the corporation o	supplemental annual rep	t qualify for the ort is true and a compowered to compowered to compowered to compowered to compowere to compower to compowere to compowere to compowere to compowere to compower to compowere to compowere to compowere to compowere to compower to compowere to compowere to compowere to compowere to compower to compowere to compower	exemption sta	lated in Section 119.07(3)(i), Florida Statutes. I further certify that the that my signature shall have the same legal effect as if made under oath; the eport as required by Chapter 607, Florida Statutes; and that my name