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 # 1. Corporation Name P95000048508 (2)

ENGINEERED STRUCTURES AND SHUTTERS, INC.

FILED Jun 04 1998 8:00am Secretary of State



		<u></u>			
Principal Place of Business Mailing Address				MAN KATAK ALIKI MAKAN ININ KANT	
18074 PERIG		18074 PERIGON WAY			
JUPITER FL 33458		JUPITER FL 33458		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	7017102
				06/21/1995	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26 PO BOX 6	37	65-0602534	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & Stato	Florida	6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 JUP 17-28	•	Trust Fund Contribution	Added to Fees
24	η ´	274/00	Country 30 USA	8. This corporation owes or has paid the co	· ·
[24]	25 25 Name and Address of Curren		30 037	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
VE		gon	81 Name	10. Hamb and Address of New Hegistered	Ayont
KENNEDY, MICHAEL J 1801 Australian ave. South					
#100			82 Street A	Address (P.O. Box Number is Not Acceptable)	
W PALM BEACH FL 33409			83	· · · · · · · · · · · · · · · · · · ·	
			84 City		85 Zip Code
<u> </u>				<u>FI</u>	_ '
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida 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 Florida, 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 Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, type for review came of registered against each late of applicable. INCLE Registered Agent signature required when reinstating). DATE					
12.	OFFICERS AND		13.	equired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE	ADDITIONAJOTA NOCEO TO OTT TOETIO AN	Change Addition
NAME	GOULDY, RUSSELL		1.2 NAME		
STREET AODRESS	18074 PERIGON WAY		1.3 STREET ADDRESS		
CITY-\$T-ZIP	JUPITER FL 33458		1.4 CITY - ST - ZIP		
TITLE	Ť	DELETE	2.1 TITLE		Change Addition
NAME	GOULDY, CORRINN		2.2 NAME		
STREET ADDRESS	18074 PERIGON WAY		2.3 STREET ADDRESS		
CITY-ST-ZIP	JUPITER FL		2. 4 CITY-ST-ZIP		
TITLE	_	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELE1E	4.1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		ļ
CITY-ST-ZIP		····	4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE	Spanis Sample Spanis Sample Sample Spanis Spanis Spanis	Change Addition
NAME			6.2 NAME	9000025513	7 = 18/7
STREET ADDRESS			6.3 STREET ADDRESS	-06/08/93010880	ター ノレドリー
CITY-ST-ZIP			6.4 CITY-ST-ZIP	***550.00	

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 roport or suppliemental 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 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 attack medicate the same legal effect as if made under oath; that I am an 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 attack medicate the corporation of the corporation of