FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

	AL REPORT	V./	ry of State • CORPORATIONS		
DOCUN 1. Corporation	MENT # P9500	0059916 (3)		
1	WALL SYSTEMS, INC.			4 1801/8 B) 418-46/8/ 6/11/ 6/8/4 6/8/	II 40/II 40/II 11/II 11/II
Principal Place	of Business	Mailing Address			
3510 NE HIGHWAY 315 3510 NE HIGHWAY 315 SILVERSPRINGS FL 34488 SILVERSPRINGS FL 34488					
0.272.103 1431		<u> </u>		3. Date incorporated or Qualified 08/02/1995	3a. Da'e of Last Report
2. Principal Pta 21	ice of Business	2a. Mailing Address 26		4. FEI Number 33 55	449 Applied For Not Applicable
Suite, Apt. #	, etc	Suite, Apt. #, etc.	-	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	Country 25	7 ₁ p	Country 30		intangible tax under s 199.032,
	Name and Address of Curren	t Registered Agent	64 N	10. Name and Address of New F	
LHOVO	DANDEL		1 1	DE ROODENBEKE,	
HICKS, DANIEL 2303 SE 17TH STREET 82 Street Addre				ress (P.O. Box Number is Not Acceptal 3 5 1 0 んき みゅっち 3	ple)
SUITE 201 83 C				ILUER SPAINSI	
	OCALA FL 34471				85 Zip Code
or registe e	o the provisions of Sections 607.0502 ed agent, or both, in the State of Floric h, and accept the obligations of, Secti	la. Such change was authorize	is, the above-named corpo ed by the corporation's boa	ration submits this statement for the purificial ration and directors. I hereby accept the app	rpose of changing its registered office continuent as registered agent. I am
SIGNATORE	Surviva tope to a great true obeysome agent		 Ragistered Agent signature require 		DATI /
101.	OFFICEBS-AND	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFF	GERS AND DIRECTORS IN 12
MAM:	GRAY, AL	_ J.c.c.i.	1.2 NAME		
STREET ADDRESS	3510 NE HIGHWAY 315		1.3 STREET ADDRESS		
C-1Y+S1+7-2	SILVERSPRINGS FL 34488		1.4 CITY - ST - ZIP		
filter	D	☐ DELETE	2 1 TITLE		Change Addition
NAM!	FISHER, J. NEIL		2 2 NAME		
STREET ADDRESS	3510 NE HIGHWAY 315 SILVERSPRINGS FL 34488		2.3 STREET ADDRESS		
Catr \$1-7m Inte	D	☐ DELETE	2 4 CITY - ST - ZIP 3 1 TITLE		Change Addition
NAME	DE ROODENBEKE, NOEL		32 NAME		
STREET ADDRESS	3510 NE HIGHWAY 315		33 STHEET ADDRESS		
CHY ST 78	SILVERSPRINGS FL 34488		3 4 CITY - ST - ZIP		
101_f		DEFELE	4 1 TITLE		Change Addition
NAV:			4.2 NAME	90000012	a cooo
STREET ADDRESS			4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	9000017 -03/18/9601	029009
City St ZiP Title		☐ DELFTE	5 1 TillE	***200.00	☐ Change ☐ Addition
NAVI			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CHY SI-74		FT PS. CTC	5 4 CITY - ST - ZIP		Chapes Addition
TILF		☐ DETELE	6 1 THTLE		☐ Change
NAME CANCEL AND SOCIO			6.2 NAME 6.3 STREET ADDRESS		XV) (S)
STHEFT ADDRESS			6.3 STREET AUDITOS :		W ng

14. If the hereby certify trial the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. If 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 cath, 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 attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED MANE OF SIGNING OFFICER OR DIRECTOR

SECU. THEAS.

2/21/96 904-236-1740

CR2E034 (12/95)