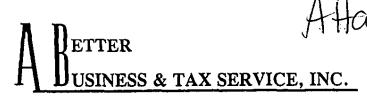
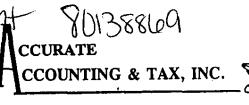
## FILED Aug 15, 2003 8:00 am Secretary of State

## 2 0 0 3 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

U	MIFORM BUSIN	IE22 KEKOKI	ŢU	RK)		08-15-2003 90084 032 *	***150.00
1. Entity Nar	MENT # P9500007		(L)			08-13-2003 30004 032	130.00
520.0		512			<b>'</b> }		an gara
DO NOT WRITE IN THIS SPACE					`		e de la companya de l
2. Principal Place of Business 3. Mailing Address							8 9 m 6
780 EAST LAKE DRIVE		780 EAST LAKE [	780 EAST LAKE DRIVE				
Suite, Apt	t, #, etc.	Suite, Apt. #, etc.				' DO NOT WRITE IN THIS SPACE	
City & Sta		City & State NAPLES. FL			4. FI	El Number 65-0620141	Applied For Not Applicable
Zip Country 34102 USA		Zip 34102	Country		<b>5.</b> C		5 Additional
34102	OSA	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	UJA		7. Nar	me and Address of Current Registered Ager	
DO NOT WORLD				Name RADTKE, THOMAS J			
**						ox Number is Not Acceptable)	
IN THIS SPACE				780 EAST LAKE DRIVE			
8		The Control of the Co		City NAPLI	ES	FL 3	io Code 4102
	e named entity submits this statement tions of registered agent.	for the purpose of changing its	register	ed office or regis	tered age	ent, or both, in the State of Florida. I am familia	
tric obliga							I
SIGNATURE	Signature, typed or printed hame of registered ag-	ent and title if applicable. (NOTE	: Registere	d Agent signature requi	ired when reir	nstating) DATE	
	inuary 1 - May 1 Fee is \$150,00 After May 1, Fee is \$550,00 Amended UBR is \$61,25 k Payable to Florida Department	of State		- · · · · ·		9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
10.	A STATE OF THE STA	ID DIRECTORS					
TITLE NAME	DPT 1		TIŢLI NAM	· (:		The state of the s	00/61
STREET ADDRESS CITY-ST-ZIP	RADTKE, THOMAS J <sup>2</sup> 780 EAST LAKE DRIVE	, NAPLES, FL 34102	STRE	ET AODRESS +ST-ZIP		• • • • • • • • • • • • • • • • • • •	CP as
TITLE NAME	SAT		TITLI	1	* :		CROE
STREET ADDRESS	700 EACT   AVE DON/E NIADI EC El 2/102			ET ADDRESS		A Company of the Comp	\ \frac{1}{2} \
CITY-ST-ZIP	760 EAST LAKE DRIVE,	NAPLES, FL 34102	CITY	-ST-ZIP			- X 2
TITLE NAME		·	NAM	enet e l	MAL COLOR	ا المراجع المراجع	TOTAL COLUMN TO A STATE OF THE
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS - ST-ZIP		DO NOT WRITE	
TITLE	,		TITL		-	IN THIS SPACE	
NAME STREET ADDRESS		•	NAM STRE	E Et adoress			
CITY-ST-ZIP			ÇITY	-ST-ZIP			Surviva .
TITLE NAME			TITLE NAM	•			1000
STREET ADDRESS			3	ET ADDRESS			
CITY-ST-ZIP TITLE			TITLE	-ST-ZIP	<del></del>		30.4
NAME			NAM	E		The state of the s	
STREET ADDRESS CITY-ST-ZIP		•	5.5.5	et address -st-zip			
12. 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 report or supplemental 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 10 or chan attachment with an address, with all other like empowered.							
SIGNAT	TURE:	<b>.</b>			<del>-</del>	8/18/02 (239)24	3-0829
	SIGNATURE AND TYPED O	R PRINTED NAME OF SIGNING OFFICER	OR DIRECT	OR		Date / Daytime Pt	one#







August 7, 2003

Division of Corporations
P. O. Box 1500
Tallahassee, FL 32302-1500

Re:

Designer Windows & Doors, Inc. Document No. P95000071112 2003 Uniform Business Report

## Gentlemen:

The original Report was never received seeing that it was mailed to a post office box.

Our office called the Division of Corporations to explain the problem and we were told to write this letter explaining the situation and to have the corporation send the Corporation Reinstatement along with a check for \$150.00.

Check number <u>6855</u>, in the amount of \$150.00, is enclosed to cover this report.

Thank you.

Sincerely,

Helen Watson President

/rr

**Enclosures**