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

CORPORATION ANNUAL REPORT

· 1997

NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600000355 (3)

BRUNSWICK DOOR COMPANY, INC.

Principal Place of Business Mailing Address 635 SAND PINE LANE 635 BAND PINE LANE DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442-1301 3. Date Incorporated or Qualified 3a. Date of Last Report 12/26/1995 05/01/1996 Principal Place of Business Mailing Address 4. FEI Number Applied For 65-067428 APPLIED FOR 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s 199.032, Yes No 24 25 30 29 Florida Statutes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GUZINSKI, ERIK **635 SAND PINE LANE** Street Address (P.O. Box Number is Not Acceptable) DEERFIELD BEACH FL 33442 83 84 City Zip Code 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 agent, if am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. 13. DELETE PSTD Change Addition TITLE 11 DHE **GUZINSKI, ERIK** NAME 1.2 NAME 635 SAND PINE LANE STREET ADDRESS 1.3 STHEET ADDRESS DEERFIELD BEACH FL 33442 CITY-ST-ZIP 1.4 CiTY-ST-ZiP TITLE ☐ DELETE ☐ Change Addition 21 TITLE NAME 22 NAME STREET ADORESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CiTY-ST-ZIP DELETE TITLE 3.1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE TITLE ___ Addition 4.1 THILE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - S1 - 7(P DELETE TITLE 5.1 TITLE _ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE TITLE Addition 6.1 TITLE

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1); 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 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 changer, or on an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS

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FILED

Jun 18 1997 8:00am

Secretary of State