Feb 23, 1999 8:00 am

Secretary of State

02-23-1999 90029 017 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600006285 1. Corporation Name

THE SCREEN DEPOT, INC.							COMPANION OF COMPANION AND COM	1808 81118 (188)	rei n i Airi 1861	
Principal Place	of Business	Ma	iling Address				I \$0013\$\$1 110 14116 31511 40114 50131 40311 4	10210 0211 8 21081		
5319 ROSEMAR			9 ROSEMARY AVE. N.							
BOYNTON BEACH FL 33437 BOYNTON BEACH FL 33437							DO NOT WRITE IN THIS SPACE			
								SPACE		
							3. Date Incorporated or Qualifed 01/17/1996			
2. Principal Pl	ace of Business	2a.	Mailing Address				4. FEI Number		plied For	
21		26	_				65-0640353		t Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certifcate of Status Desired	\$8.75 A Fee Re		
22		27	O't a Otal						<u> </u>	
City & State	9	<u> </u>	City & State				6. Election Campaign Financing	\$5.00 Added to		
23	Country	28		Count	n/		Trust Fund Contribution		01663	
Zip	Country 25	20	· ' -	30	у		This corporation owes the current year Int Personal Property Tax.	angiole ∐Yes	No	
24	9. Name and Address of Currer	29 of Regist		30 ₁			10. Name and Address of New Registered		=	
	g. Hame and Address S. School	g.c.		8	1 Na	me				
MILLER, KENNETH 5319 ROSEMARY AVE. N.										
					82 Street Address (P.O. Box Number is Not Acceptable)					
	NTON BEACH FL 33437			8	3					
,										
				8	4 Cit	y	FL	85 Zip C	Code	
44 D	to the provisions of Sections 607 050	12 and 60	7 1508 Florida Statute	e the abo	Ve-nan	ned co	moration submits this statement for the purpose of	changing its	registered	
office or re	egistered agent, or both, in the State	of Florid	a. Such change was au	tnorizea b	y tne c	orpora	tion's board of directors. I hereby accept the appoint	ntment as req	gistered	
agent. I a	m familiar with, and accept the obliga	itions of,	Section 607.0505, Flon	aa Statute	es.					
SIGNATURE	Signature, typed or printed name of registered age	nt and title if	applicable /NOTE:	Registered Ac	ent signa	ture recul	ired when reinstating) DATE		——	
12.	OFFICERS AN			13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12	
TILE	D		□ DELETE	11 TITLE		P		Change	☐ Addition	
NAME	MILLER, KENNETH			1,2 NAME	Ξ	l in	nillea, Kenneth		1	
STREET ADDRESS	5319 ROSEMARY AVE. N.			1.3 STRE	ET ADDR	ESS 5	5319 Rosemanie Aue N.		1	
CITY-ST-ZIP	BOYNTON BEACH FL 33437			1.4 CITY		a la	boynton Beach, FL . 3343)		
TITLE	BOTHTON BEACHT E 30407		☐ DELETE	2.1 TITLE				Change	Addition	
NAME			. —	2.2 NAMI	<u> </u>	1	WILLER TAMMY			
STREET ADDRESS					Et addr	ess .	MilleR, TAMMY 1319 ROSEMANIE AUE N.		-	
				2. 4 CITY		3	Boy Bu, FL, 33437		İ	
CITY-ST-ZIP TITLE			☐ DELETE	3.1 TITLE				☐ Change	Addition	
NAME				3.2 NAM	=	İ				
STREET ADDRESS	1				- ET ADDR	RESS			}	
				3.4. CITY						
CITY-ST-ZIP TITLE			DELETE	4.1 TITLE				☐ Change	Addition	
NAME				4. 2 NAM				·	1	
					ET ADDR	ess			.	
STREET ADDRESS				4.4 CITY						
CITY-ST-ZIP	·		☐ DELETE	5.1 TITLE				Change	Addition	

CITY-ST-ZIP 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 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 changed, or on an attachment with an address, with all other like empowered.

5.2 NAME 5 3 STREET ADDRESS

6.1 TITLE

6.2 NAME

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Kenneth R Miller

DELETE

☐ Change

☐ Addition