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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

POCUMENT # P96000017426 (3)

MICHAEL'S DOOR, INC.

Principal Place of Business	Mailing Address	
2821 S MACDILL AVE TAMPA FL 33629	2821 S MACDILL AVE TAMPA FL 33629-7223	
2. Principal Place of Business	28. Mailing Address	
	⊢ı *	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	

FILED May 13 1997 8:00am Secretary of State



TAMPA FL 33629		IAMPA FL 33029-7223					
					3. Date incorporated or Qualified 02/26/1996	3a. Date of Last R	Report
'	Principal Place of Business 28. Mailing Address			4. FEI Number	Ar	oplied For	
21	26			59-3368031	No	ot Applicable	
ومنس	Suite, Apt. #, etc.			5. Certificate of Status Desired	, , , , , , , , , , , , , , , , , , , ,	Additional	
City & State						equired	
23		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Coun	try	8. This corporation has liability for in		. 199.032,
24	25	29	30	***************************************		Yes No	
	9. Name and Address of Curre	ent Registered Agent		Name -	10. Name and Address of New Reg	jistered Agent	
	NANCY 1			Name CH	IARLES Q. GARDNER		
	DE PARK AVE		8	2 Street Add	dress (P.O. Box Number is Not Acceptab	le)	
TAMPA	\ FL 33806		-	240	3 PALM Dz. #	<i>I</i>	·
			`		MPA		
			ε	Gity City		FL 85 22	Codo q
11. Pursuant to	the provisions of Sections 607.05	02 and 607,1508. Florida Statut	tos, the abo	 ove-named co	rporation submits this statement for the p		ts registered
office or reg	istered agent, or both, in the Stat	te of Florida. Such change was a	authorized	by the corpora	rporation submits this statement for the p ation's board of directors. I hereby accep	t the appointment as	registered
	ramiliar with, and accept the only	gations of, acction 007.0305, Fi	unua otatu	ies.		4/28/91	7
SIGNATURE SIGNATURE	makes mixed or particular of models and a	gent and ade copplication (NO)	L: Registered A	Agent signature req	uired when reinstating)	DAT	<u> </u>
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		
TITLE		☐ DECETE	1.1 THE	f		☐ Change	Addition
	BARDNER, CHARLES		1.2 NAN	I E			
	2821 S MACDILL AVE		1.3 STR	EET ADDRESS			
	TAMPA FL 33629	Northern Contract		-ST-ZIP			TT 1
-	OAMAL BROMER	DELETE	21 TITL			☐ Change	Addition
	RAHAL, MICHAEL 2821 S MACDILL AVE		2.2 NAN	1	· ·		
	IAMPA FL 33829			EET ADDRESS			
)	DELETE	311111	Y-ST-ZIP		Change	Addition
	GUESS, KIMBERLY		3 2 NAM			crimingo	/300kton/
STREET ADDRESS	2821 S MACDILL AVE			EET ADDRESS			
	TAMPA FL 33629			Y-SI-ZIP			
TITLE	, , , , , , , , , , , , , , , , , , ,	DELETE	41 111			☐ Change	Addition
NAME			4 2 NA	l l		.— •	-
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP				/-ST-ZIP			
TITLE		DELETE	5 1 TITL	F		☐ Change	Addition
NAME			52 NAM	Œ			
STREET ADDRESS			5.3 STR	EFT ADDRESS			
CITY-ST-ZIP		<u></u>	5.4 CITY	(-S1-ZIP			
TITLE		☐ DELETE	6.1 TITL	E		Change	Addition
NAME			6.2 NAM	1E			
STREET ADDRESS			6.3 STR	EE1 ADDRESS			
CITY-ST-ZIP			6.4 CITY	(-ST-ZIP			

do 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. 4/20/00