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

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90163 022 ***150.00

DOCUMENT # P9600041965 1. Corporation Name

INVINCIE	BLE WINDOWS & SIDING S	YSTEMS, INC.							
Principal Place	e of Business	Mailing Address				4 1 08 51 08 3 119 10150 01114 EDISI	98111 #\$111 B\$111	, \$1801 11879 18719 1	Bile: Bill (884
10931 75TH ST									
LARGO FL 34647 LARGO FL 34647						אר איטר אי	RITE IN THIS	C CDACE	
33777 33777						3. Date Incorporated or Qualife		3 OI ACL	_
						05/09/1996	u		
2 Principal Pl	ace of Business	2a, Mailing Address				4. FEI Number		IdV	plied For
21 21 26						59-3384534			Applicable
	Suite, Apt. #, etc. Suite, Apt. #, etc.							\$8.75 A	
27						5. Certifcate of Status Desired		Fee Red	quired
City & State City & State			,			6. Election Campaign Financin		\$5.00 1	May Be
23						Trust Fund Contribution	" 🗆	Added to	Fees
Zip Country Zip			Country			8. This corporation owes the c	irrent year In		_
24	25 29 30			···.		Personal Property Tax.			□No
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of Nev	Registered	Agent	
ENG	LANDER, LEONARD S ESQ.		81	Name					
5959 CENTRAL AVENUE STE 201 721 FIRST AVENUE W. ST. PETERSBURG FL 99740 33731				82 Street A		ss (P.O. Box Number is Not Acce	otable)	<u>—</u>	
				City			FL	85 Zip C	Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	the abov	e-named o	corpor	ation submits this statement for t	ne purpose o	f changing its	registered
office or re agent. I a	to the provisions of Sections our Justi egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was aut tions of, Section 607.0505, Florid	horized by ta Statutes	the corpo i.	oration	's board of directors. I hereby act	ept the appo	antment as reg	jistered
SIGNATURE		LOUIS ALL MOTES		a -lntura sa		the completed	DATE		
12.	Signature, typed or printed name of registered ager	D DIRECTORS	13.	nt signature ta	Annea A	ADDITIONS/CHANGES TO 0		ND DIRECTO	RS IN 12
TITLE	D	DELETE	1.1 TITLE	$\overline{}$		ADDITIONO CITATORO TO S		Change	Addition
NAME	ENGLANDER, LEONARD S	-	1.2 NAME		E,	relander learned	ς .		
STREET ADDRESS	5959 CENTRAL AVENUE STE 201		1.3 STREET ADDRESS) 7	aglander leonard	ř.		1
CITY-ST-ZIP	ST. PETERSBURG FL 33710		1.4 CITY-S		้เรีย	TPETERS BURG, FL	33731		
TITLE	······		2.1 TITLE	<u> </u>		TELE TO BE TO STATE OF THE STAT		Change	☐ Addition
NAME	-		2.2 NAME						
STREET ADDRESS	ACCOUNTED OF			TADDRESS					ì
CITY-ST-ZIP	LARGO FL			ST-ZIP				•	
TITLE			3.1 TITLE					☐ Change	Addition
NAME	FIELD, STEVEN 3		3.2 NAME						
STREET ADDRESS	10931 75TH ST		3.3 STREE	TADORESS					
CITY-ST-ZIP	LARGO FL		3.4. CITY-	ST-ZIP					
TITLE	DELETE 4							☐ Change	☐ Addition
NAME			4. 2 NAME						1
STREET ADDRESS			4.3 STREE	TADDRESS					
CITY-ST-ZIP			4.4 CITY-5	T-ZIP					
TITLE		☐ DELETE	5.1 TITLE	ĺ				☐ Change	☐ Addition
NAME		∌	5.2 NAME	4. et.,					
STREET ADDRESS				T ADDRESS					
CITY-ST-ZIP			5,4 CITY- 5	T-ZIP					
TITLE		☐ DELETE	6.1 TITLE			_		Change	☐ Addition
NAME		Funds - P	6.2 NAME	الإدعوات		, ,			
STREET ADDRESS	_	•	6.3 STREE	TADDRESS					}

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 suppliemental annual report is true and accordate 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 requirer 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 apachment with an address, with all other like empowered.

6.4 CITY- ST-ZIP

SIGNATURE:

CITY-ST-ZIP