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 # P96000051908

1. Corporation Name

ADVANCED WINDOW AND GLASS, INC.

Principal Place		Mailine Addroso	-						
		Mailing Address					•		
4215 QUECHUA		4215 QUECHA ROAD			1				
COCOA FL 329	327	COCOA FL 32927				DO NOT WRI	TE IN THIS	SDACE	
US	-	US			<u>_</u>		E IN IMIS	SFACE	<u>-</u>
					} `	3. Date Incorporated or Qualifed 06/17/1996			}
								T-1 A	li-d For
2. Principal Pl	lace of Business	2a. Mailing Address			1	FEI Number			pplied For
21	<u> </u>	26				59-3390762			lot Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc	-	•		Certifcate of Status Desired	D		Additional
22		27				,		Fee F	Required
City & State		City & State			6	6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution	<u> </u>	Added	to Fees
Zip	Country	Zip	Cou	intry		This corporation owes the curr	ent year Inta	angible	
24	25	29	30	•	· `	Personal Property Tax.		⊈Yes	□No
	9. Name and Address of Currer]	10	. Name and Address of New F	legistered A	Agent	
	3			81 Name				7	
AUM	MENT, SCOTT A								
4215 QUECHUA ROAD				82 Street	Address	(P.O. Box Number is Not Accepted	ible)		
	COA FL 32927								
COL	JUN I'L SEBEI			83					
				84 City				85 Zip	Code
				OH City			FL		
44 Purcuant	to the provisions of Sections 607.050	2 and 607 1508 Florida Statut	es the a	bove-named	corporati	on submits this statement for the	purpose of	changing it	s registered
office or r	registered agent, or both in the State im familiar with, and accept the obliga	of Florida. Such change was a	uthorized	by the corp	oration's	board of directors. I hereby accept	t the appoir	ntment as r	egistered
agent. I a	ım fam ilia r with and accept the obliga			utes.			11131	7 03	
SIGNATURE-	Soff	Scott A. AUM		<i>_</i> _	2 <u>RUS</u> ,	<u>, </u>	1/3/1	/	
	Signature, typed or printed name of registered age			Agent signature	required when		DATE	, D.D.D.G.T.	000 111 40
12.	, ,	ND DIRECTORS	13.		_	ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECT	
TITLE									
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	AUMENT, SCOTT A	LJ DELETE	1.2 N	AME		nt, Scott A. Quechua Road		L-3 Change	. □ Wadition i
NAME STREET ADDRESS	AUMENT, SCOTT A 4215 QUECHUA ROAD	LJ DELETE	1.2 N	AME TREET ADDRESS	4215	Quechua Road		E-5 Change	Mudition ;
NAME STREET ADDRESS CITY-ST-ZIP	AUMENT, SCOTT A		1.2 N/ 1.3 ST 1.4 CI	AME TREET ADDRESS ITY-ST-ZIP	4215			Change	
NAME STREET ADDRESS CITY-ST-ZIP TITLE	AUMENT, SCOTT A 4215 QUECHUA ROAD	I_J DELETE	1.2 N/ 1.3 ST 1.4 CI 2.1 Π	AME TREET ADDRESS TY-ST-ZIP TLE	4215	Quechua Road	<u> </u>		
NAME STREET ADDRESS CITY-ST-ZIP	AUMENT, SCOTT A 4215 QUECHUA ROAD		1.2 N 1.3 ST 1.4 CI 2.1 TI 2.2 N	AME TREET ADDRESS ITY-ST-ZIP TLE AME	4215 Cocoa	Quechua Road	<u> </u>		
NAME STREET ADDRESS CITY-ST-ZIP TITLE	AUMENT, SCOTT A 4215 QUECHUA ROAD COCOA FL 32922		1.2 N 1.3 ST 1.4 CI 2.1 TI 2.2 N	AME TREET ADDRESS TY-ST-ZIP TLE	4215 Cocoa	Quechua Road			
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	AUMENT, SCOTT A 4215 QUECHUA ROAD COCOA FL 32922	☐ DELETE	1.2 N/ 1.3 ST 1.4 CI 2.1 TI 2.2 N/ 2.3 S	AME TREET ADDRESS ITY-ST-ZIP TLE AME	4215 Cocoa	Quechua Road	-2-	Change	Addition
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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 attact ment and address, with all other like empowered.

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90098 018 ***150.00

CR2E034 (11/98)