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

Mailing Address

8500 NW 64TH ST

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9600061837

Principal Place of Business 8500 NW 64TH ST

STREET ADDRESS

CITY-ST-ZIP

AMERICAN WINDOWS & DOORS, INC.

MIAMI FL 33166 MIAMI FL 33166 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 07/22/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 65-068 1533 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be  $\Box$ Trust Fund Contribution Added to Fees 28 23 Country Country Zip 8. This corporation owes the current year Intangible Zip  $\square$ No 30 Personal Property Tax. 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent GONZALEZ, RAQUEL Street Address (P.O. Box Number is Not Acceptable) 14011 S.W. 17TH STREET DAVIE FL 33325 83 City 85 Zip Code 84 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 of fice 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. I 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change ☐ Addition DELETE 1.1 TITLE TITLE MONTERO, GONZALO 1.2 NAME NAME 3611 S 15TH ST 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33145** 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE 21TIII F Сhange TITLE GONZALEZ, FERMIN O 2.2 NAME NAME 14011 SW 17TH ST 2.3 STREET ADDRESS STREET ADDRESS DAVIE FL 33325 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change Addition □ DELETE 3.1 TITLE TITLE 3.2 NAME GONZALEZ, RAQUEL NAME STREET ADDRESS 14011 S.W. 17TH STREET 3.3 STREET ADDRESS DAVIE FL 33325 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 4.1 TITLE TITLE MONTERO, SYLVIA 4. 2 NAME NAME **3611 S. 15TH STREET** 4.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33145 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ DELETE TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE ☐ Change ☐ Addition TITLE NAME

6.3 STREET ADDRESS

6.4 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.

FILED

Jan 23, 1999 8:00am

**Secretary of State** 

01-23-1999 90044 024 \*\*\*150.00

CR2E034 (11/98)