

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

**FILED**  
**Apr 27, 1999 8:00 am**  
**Secretary of State**

04-27-1999 90077 041 \*\*\*150.00

0272130

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State <b>DIVISION OF CORPORATIONS</b>
--	---	--

**DOCUMENT # P96000062172**

1. Corporation Name  
**WINDOW ENHANCEMENTS AND MORE, INC.**



Principal Place of Business 6595 NW 36TH STREET #119 MIAMI FL 33166	Mailing Address 1501 S.W. 16 AVENUE MIAMI FL 33145
--	--

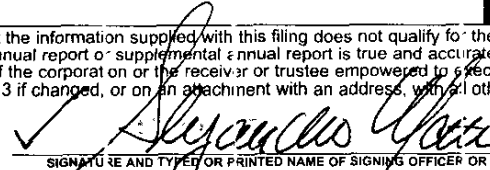
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1710 W. 41st Bay 3		2a. Mailing Address 26		3. Date Incorporated or Qualified 07/19/1996	
Suite, Apt. #, etc. 22 2		Suite, Apt. #, etc. 27		4. FEI Number 65-0684870	
City & State 23 Hialeah		City & State 28		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 24 33012		Country 25 USA		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Zip 29		Country 30	
9. Name and Address of Current Registered Agent MARTIN, ALEX 6595 NW 36 ST. #119 MIAMI FL 33166			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code		

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 office 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. (NOT E: Registered Agent signature required when reinstating)		DATE	
12. OFFICERS AND DIRECTORS			
TITLE	DVS	<input checked="" type="checkbox"/> DELETE	
NAME	MARTIN, BERTA		
STREET ADDRESS	3205 W. 16 AVE., #B37		
CITY-ST-ZIP	HIALEAH FL 33012		
TITLE	DPT	<input checked="" type="checkbox"/> DELETE	
NAME	MARTIN, ALEX		
STREET ADDRESS	3205 W 16 AVE #B37		
CITY-ST-ZIP	HIALEAH FL 33012		
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE	DPT PRESIDENT	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
1.2 NAME	MARTIN, NELSON JR.		
1.3 STREET ADDRESS	1710 WEST 41ST BAY 3 SUITE 2		
1.4 CITY-ST-ZIP	HIALEAH, FL 33012		
2.1 TITLE	DVS V.P.	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
2.2 NAME	MARTIN, ALEX		
2.3 STREET ADDRESS	1710 WEST 41ST BAY 3 SUITE 2		
2.4 CITY-ST-ZIP	HIALEAH, FL 33012		
3.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
6.2 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.

**SIGNATURE:**  **4/20/99.** **876 0057**

CR2E034 (11/98)