PL CK#01033 FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 27 1998 8:00am

Secretary of State

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Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000089447 (2)

INSTALLATIONS PLUS US, INC.

						<u> </u>				
Principal Place of Business Mailing Address									******	11 1891 1891
7028 W. WATI SUITE 306	ers avenue		7028 W. WATERS AVENUE SUITE 306 TAMPA FL 33634							
TAMPA FL 33	634						DO NOT WRITE IN THIS SPACE			
ļ							3. Date Incorporated or Qualified			
5 District	· · · · · · · · · · · · · · · · · · ·					···	10/29/1996			
<u> </u>	lace of Business	<u> </u>	g Address				4, FEI Number			oplied For
21 Suite, Apt	#. etc	26 Suite	Apt. #, etc.				59- <u>3407113</u>			ot Applicable Additional
22		27	. 4				Certificate of Status Desired	_ Ψ	-	equired
City & Stat	0		City & State				6. Election Campaign Financing \$5.00 May Be			
23		28	28				Trust Fund Contribution Added to Fees			
Zip	Country	Zip	-1				8. This corporation owes or has paid the current year Intangible			
24	25 29 30			30	Personal Property Tax due June 30. X Yes No					
Name and Address of Current Registered Agent					10. Name and Address of New Rec				nt	
COTTER, GINGER R					_	Trane				
7028 W. WATERS AVENUE					62	Street Addr	Street Address (P.O. Box Number is Not Acceptable)			
SUITE 306 TAMPA FL 33634				83						
1/4	MFM FL 33034			Ĺ						
					84	City		FL 8	5 Zip	Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.150	8. Florida Statu	tes, the ab	ove	-named corp	oration submits this statement for the purpo	ose of cha	inging if	s registered
agent. La	egistered age nt, or both, in the Sta m fami liar with, and accept the ob	ae of Florida, Suc ligations of, Secti	on change was on 607.0505, Fl	authorized Iorida Stati	i by Jies.	the corporati	ion's board of directors. I hereby accept the	ie appointi	nent as	registered
SIGNATURE										
	Signature, typed or printed name of registered	ngest and billed applica ND DIRLOTORS	ble (NO		Ager	rt signature requir	ed wher reinstating) D ADDITIONS/CHANGES TO OFFICERS	DATE	OF OTO	00 IV 40
12.	p	(ND DIVECTORS	DELETE	13.	ı F		ADDITIONS/CHANGES TO OFFICERS		Change	Addition
NAME	COTTER, GINGER R			1.2 NA						
STREET ADDRESS	318 W CURTIS ST					ADDRESS				
CITY-ST-ZIP	TAMPA FL			1.4 CIT						
TITLE			DELETE	21 TIT					Change	Addition
NAME				2.2 NA	ME					
STREET ADDRESS				2.3 \$16	REET	ADDRESS				
CITY-ST-ZIP				2. 4 Cf	1 Y - S	1 - ZIP				<u>.</u>
TITLE			☐ DELETE	3.1 7(1)				Ц	Change	Addition
NAME				3.2 NAI						
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP TITLE			☐ DELET É	3.4. CII 4.1 TH		T - ZIP			Change	Addition
NAME			DELETE	4. 2 NA					Change	
STREET ADDRESS						ADDRESS				
				4.4 CIT						
TITLE			☐ DELETE	5.1 TIT		- E11			Change	Addition
NAME				5.2 NA		1			-	
STREET ADDRESS				5.3 STF	REET A	address				
CITY-ST-ZIP				5.4 CIT	Y-\$T	- ZIP				
TITLE			DELETE	6.1 7IT	LE				Change	Addition
NAME				6.2 NAI	ME					
STREET ADDRESS				6.3 STF	REET A	ADDRESS				

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated on this annual roport or supplemental annual roport 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 yequired by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an attackpoint with an address.