

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

FILED
May 18 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000033128 (4)

1. Corporation Name

DURALUX INTERNATIONAL CORP.



Principal Place of Business

Mailing Address

8522 S.W. 102ND STREET
MIAMI FL 33156

8522 S.W. 102ND STREET
MIAMI FL 33156

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

04/11/1997

4. FEI Number

05-0741932

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LORIE, RAFAEL T
8522 S.W. 102ND STREET
MIAMI FL 33156

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, if applicable,

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME

PSD
LORIE, RAFAEL T
8522 S.W. 102ND STREET
MIAMI FL 33156

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME

☐ DELETE

2.1 TITLE
2.2 NAME

☐ Change ☒ Addition

STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

Catherine H. Long
8522 S. W. 102 Street
Miami, FL 33156

TITLE
NAME

☐ DELETE

3.1 TITLE
3.2 NAME

☐ Change ☐ Addition

STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME

☐ DELETE

4.1 TITLE
4.2 NAME

☐ Change ☐ Addition

STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME

☐ DELETE

5.1 TITLE
5.2 NAME

☐ Change ☐ Addition

STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME

☐ DELETE

6.1 TITLE
6.2 NAME

☐ Change ☐ Addition

STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

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

SIGNATURE:

Rafael T. Lorie
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/11/98 (305) 274-6631
Date Daytime Phone # 0219646

CR2E034 (10/97)