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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Aug 12 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary old State

DIVISION OF CORPORATIONS

DOCUMENT # P97000048880 (3)

B.A.C. SHUTTERS CORPORATION

	`.						
Principal Place of Business Mailing Address						lanı belir İlder inter leher idini edir iddi	
5431 N.W. 15TM ST 5431 N.W. 15 SUITE 10986 SUITE 10986 MARGATE FL 33363 MARGATE FL			TH ST		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
	= 16	Ta have a business			06/03/1997		
<u> </u>	face of Business	2a. Mailing Address	\$		4. FEI Number 0759	76/ Applied For	
21 Suito Ant	# alc	26 Suite, Apt. #, et			03-07-	CO 75 Additional	
Suite, Apt. #, etc.		27	N. Tarkey		5. Certificate of Status Desired	Fee Required	
City & State	0		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees	
Zıp	Country	Zip	Countr	у	8. This corporation owes or has pa	id the cur rent year Intangible	
24	25	29	30		Personal Property Tax due June		
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
FILINGS, INC.				Name Pa	FRICK SULLIUM		
3732 N.W. 16TH STREET				Street Addr	ess (P.O. Box Number is Not Acceptab	ele)	
FT. LAUDERDALE FL 33311-4132					31 NW 15th St Sume	10	
			83	/5#			
			84	City A	and the same of th	85 Zip Code	
		- A - Corre			MALGATE	FL 53265	
11. Pursuant to the provisions of Sections 607.0502 and 2027 study 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 Journal of Change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am lamiliar with, and accept the philipsions of the provision of the p							
SIGNATURE (Jalua XI	decent	(NOTE: Ring stered Ag	RICK.	Sullivan	0/4/98	
12.	OFFICERS AND		13.	on signature radan	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12	
TITLE	D	DELE				Change Addition	
NAME	SULLIVAN, PAT		1.2 NAME				
STREET ADDRESS	5431 N.W. 15TH ST SUITE 1	10986	1.3 STREE	T ADDRESS			
CITY-ST-ZIP	MARGATE FL 33263		1.4 CITY-	S1-ZIP			
TITLE	D	DELF.	TÉ 2.1 TITLE			Change Addition	
NAME	SULLIVAN, PAT JR.		2.2 NAME				
STREET ADDRESS	5431 N.W. 15TH ST SUITE 1	0986	2.3 STREE	T ADDRESS			
CITY-ST-ZIP	MARGATE FL 33263		2 4 CHY-	ST-ZIP		ua s.	
TITLE	D	☐ DELE	TE 3.1 TITLE			Change Addition	
NAME	SULLIVAN, TERI		3.2 NAME				
STREET ADDRESS	5431 N.W. 15TH ST SUITE 1	10986	3.3 STREE	T ADDRESS			
CITY-ST-ZIP	MARGATE FL 33263	DECE.	3.4. CITY-	ST-7IP		Change Addition	
TITLE	D	DELE.				Change Addition	
NAME	SULLIVAN, PETE		4. 2 NAME				
STREET ADDRESS	5431 N.W. 15TH ST SUITE 1	10986		1 ADDRESS			
CITY-S1-ZIP	MARGATE FL 33263	DELE	4.4 CITY- TE 5.1 TITLE	ST-ZIP		Change Addition	
TITLE		OLL				E change E repetion	
NAME CIDELL PODGLES			5.2 NAME	T ADDRESS			
STREET ADDRESS			5.4 CITY-1	1			
CITY-ST-ZIP TITLE		DELE'		01-415		Change Addition	
NAME		J. J. (1)	6.2 NAME			p	
STREET ADDRESS				1 ADDRESS			
SINEEL ADDRESS			U.S STREE	, DODIEGO			

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.