2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000050140

1. Entity Name



FILED Feb 21, 2003 8:00 am Secretary of State

02-21-2003 90139 016 ***150.00

METRO	GARAGE DOOR OF CENTR	AL FLORIDA, INC.) 					
Principal Place of Business 751 BUSINESS PARK BLVD SUITE 103 WINTER GARDEN FL 34787 US 2. Principal Place of Business		Mailing Address 751 BUSINESS PARK BLVD SUITE 103 WINTER GARDEN FL 34787 US 3. Mailing Address								
	- Acce of Basiness	G. Maning Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES					
City & State		City & State			1 095340 1044 1 1			pplied For	7	
Zip Country		Zip Cou		ntry	5. Certific	ate of Status Desired	ı 🗆	\$8.75 Ac		1
	6. Name and Address of Current	Registered Agent			7. Name	and Address of Nev	/ Registere	Fee Require d Agent	ea	4
UGIED	ARRELL WAYNE			Name Day	/ 3	rell-luty				7
460 PALI				Street Address	(P.O. Box Nur	mber is 10t Acceptal	鸣,			7
OCOEE I	''-						Blod.			1
,;				City A	te 10	3		<u> </u>		1
8 The above	a named entity submits this statement for	Ab		שות יוקל א	e		F		787	
the obligate	X 1 10 10 10 10 1	2 (addi	eess (Change)			2/13/	6 3		
Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department of	State			9.	Election Campaign I Trust Fund Contribut			00 May Be d to Fees	1
10.	OFFICERS AND I		11.		ADDITION	S/CHANGES TO O	FICERS AN	ID DIRECTOR	S IN 11	+
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P OGLE, DARRELL WAYNE 751 BUSINESS PARK BLVD #103 WINTER GARDEN FL 34787					,		☐ Change	☐ Addition	20,000
TITLE NAME Street address City-St-Zip		☐ Delete					-,·-	☐ Change	Addition	1000
TITLE NAME STREET ADDRESS CITY-ST-ZIP	- · · <u>-</u>	☐ Defete		_	·	-	~	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		1				☐ Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP	-	☐ Delete	TITLE NAME STREE CITY-S	T ADDRESS			-	☐ Change	☐ Addition	
ITLE NAME STREET ADDRESS CITY-ST-ZIP	,	☐ Delete	TITLE NAME STREET	I ADDRESS ST-ZIP				Change	Addition	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

407-656-5613