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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

May 12 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000084544 (0) A1-DOOR INSTALLERS, INC. Principal Place of Business Mailing Address 1900 N.W. 33RD STREET 1900 N.W. 33RD STREET SUITE 4 DO NOT WRITE IN THIS SPACE POMPANO BEACH FL 33064 POMPANO BEACH FL 33064 3. Date Incorporated or Qualified 09/29/1997 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59- 283 1189 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 28 Added to Fees Zip Country B. This corporation owes or has paid the current year Intangible No. 24 Personal Property Tax due June 30. Yes Yes 25 29 g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent GRAFF, JAY D Edith C. Johnson 665 S.W. 10TH STREET 82 sard Streat **DEERFIELD BEACH FL 33441** NW 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 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. 85 Zip Code (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE TITLE 1.1 TITLE PTD GRAFF, JAY D 1.2 NAME NAME 665 S.E. 10TH STREET 1.3 STREET ADDRESS STREET ADDRESS DEERFIELD BEACH FL 33441 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 21 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST-ZIP 2.4 CITY-ST-ZIP DELETE 3.1 TITLE Change ☐ Addition TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 41 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby 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 supplimental 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: