

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

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Jul 13, 1999 8:00 am
Secretary of State

07-13-1999 90007 014 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000016138 ✓

1. Corporation Name

ANCHOR DECKING SYSTEMS, INC.

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified FEBRUARY 18, 1998	
21	518 N.W. 77 STREET	26	518 N.W. 77 STREET	4. FEI Number 65-0812655	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
23	BOCA RATON FL	28	BOCA RATON FL		
Zip	Country	Zip	Country		
24	33487	25		29	33487
		30			

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81	Name ANTHONY G. COLEMAN, JR.
82	Street Address (P.O. Box Number is Not Acceptable) 6194 NORTH FEDERAL HIGHWAY
83	
84	City BOCA RATON
85	Zip Code FL 33487

11. Pursuant to the provisions of Sections 607.0502 and 607.1509, 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

06/10/99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	ELAYNE GIDNEY
STREET ADDRESS		1.3 STREET ADDRESS	518 N.W. 77 STREET
CITY - ST - ZIP		1.4 CITY - ST - ZIP	BOCA RATON, FL 33487
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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)(f), 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, with all other like empowered.

SIGNATURE

ELAYNE GIDNEY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06/11/99

Date

(561) 982-9966

Daytime Phone #

P98000016138
587036-90007-14

LAW OFFICES
ANTHONY G. COLEMAN, JR., P.A.

6194 North Federal Highway
Boca Raton, Florida 33487

(561) 998-5281

FAX: (561) 998-3280

June 10, 1999

Annual Reports Filings
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Corporation: Anchor Decking Systems, Inc.
Document #P98000016138

To Whom It May Concern:

Enclosed is the 1999 Profit Corporation Annual Report for the above captioned corporation, with its remittance in the amount of \$150.00 enclosed.

Please excuse corporation's late filing. The Department of State inadvertently listed the corporation's address as "7 ST.", instead of "77 STREET", as was properly listed on the "Articles of Incorporation" (see copies enclosed). Apparently, the preprinted Annual Report was mailed to the incorrect address. The enclosed 1999 Profit Corporation Annual Report corrects the address.

Thank you for your anticipated courtesy in this matter.

Sincerely,


Anthony G. Coleman, Jr.

cc.: Elayne Gidney

encls.