

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 21, 2000 8:00 am
Secretary of State

04-24-2000 90086 045 ***150.00

DOCUMENT # P98000052517

1. Entity Name

AMERICAN SHUTTERS & AWNINGS, INC.

Principal Place of Business

18361 NE 4TH CT
 NORTH MIAMI BEACH FL 33179
 US

Mailing Address

18361 NE 4TH CT
 NORTH MIAMI BEACH FL 33179-4523
 US

2. Principal Place of Business

18361 NE 4TH CT

Suite, Apt. #, etc.

N. Miami Beach

City & State

N. Miami Beach

Zip

FL 33179

Country

FL

3. Mailing Address

18361 NE 4TH CT

Suite, Apt. #, etc.

N. Miami Beach

City & State

N. Miami Beach

Zip

FL 33179

Country

FL



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0848176

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

WOLNIK, HUBERT
 9025 LEDGESTONE LN.
 PORT RICHEY FL 34668

7. Name and Address of New-Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

18361 NE 4TH CT

City

N. Miami Beach

FL

Zip Code

33179

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when relisting)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PVT	Delete
NAME	WOLNIK, EDITH	
STREET ADDRESS	18361 NE 4TH CT	
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33179	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

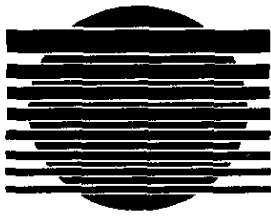
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Edith Wolnik
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-17-00 305-4930
 Date Daytime Phone #



**® AMERICAN SHUTTERS & AWNINGS,
INC.**

18361 N.E. 4th Court
North Miami Beach, FL 33179
Ph. (305) 493-0570, Fax (305) 493-0569

Division of Corporation
409 East Gains Street

Tallahassee, FL32399

July 6, 2000

In reply to: 2000 Uniform Business Report
Reference No. P. 98000052517

Dear Sir or Madam:

The correction from May 1, 2000 was made and mailed on May 15, 2000.
We hope you accept the enclosed copy of the letter from May 15, 2000.

We look forward to resolving this matter.

If any more problem occur, please contact as.

Sincerely,
American Shutters & Awnings Inc.


Edith Wolnik