**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P98000057753

1. Corporation Name

RPA, THE WINDOW COMPANY, INC.

## FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90078 018 \*\*\*150.00



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Principal Place of Business Mailing Address										
321 NORTH RAILROAD AVENUE 321 NORTH RAILROAD			NUE							
BOYNTON BEAC	JH FL 33435	BOYNTON BEACH FL 33435				DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifed 06/29/1998				
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Apr	lied For	
21		26					「	Not	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8	.75 A	dditional .	
22		27			2	5. Certificate of Status Desired	F	ee Rec	uired	
City & State	9 ,	City & State				6. Election Campaign Financing	\$!	5.00 #	May Be	
23		28			ļ	Trust Fund Contribution	A	dded to	Fees	
Zip	Country	Zip	Counti	гу		8. This corporation owes the current year In	tangible		_	
24	25	29 3	30			Personal Property Tax.	☐ Ye		□ No	
	9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New Registered	Agent			
			8	1	Name					
	DAN, JOSEPH		8	<u>-</u>  -	Street Addres	ss (P.O. Box Number is Not Acceptable)				
500 AUSTRALIAN AVENUE SOUTH SUITE 600 WEST PALM BEACH FL 33401				-	C. OUL / NOUTOO					
				3						
			Ļ	1	O:t-		85	Zip C	ode	
			8	4	City	FL	_  65	Zip C	.006	
44 Pursuant	to the provisions of Sections 607.	0502 and 607 1508. Florida Statutes	s, the abo	ve-	named corpor	ration submits this statement for the purpose of	chang	ing its	registered	
office or re	enistered agent or both in the Sta	ate of Florida. Such change was aut ligations of, Section 607.0505, Florid	(nonzea b	yιπ	ne corporation	's board of directors. I hereby accept the appo	intmeni	t as reg	istered	
SIGNATURE						when reinstating) DATE				
40	Signature, typed or printed name of registered		Registered Ag	jent s	signature required w	ADDITIONS/CHANGES TO OFFICERS A	ND DIE	RECTΩ'	RS IN 12	
12.		AND DIRECTORS	13. 1.1 TITLE	:		ADDITIONA/OTRINGES TO OTT IDENS A		hange	Addition	
TITLE	D	_ beleic							<del></del>	
NAME	MCGUIRK, STEPHEN P	* 11 1 <b>5</b>	1.2 NAME							
STREET ADDRESS	321 NORTH RAILROAD AVE		4		ADDRESS	,				
CITY-ST-ZIP	BOYNTON BEACH FL 3343		1.4 CITY		ZIP		רז ר	hange	Addition	
TITLE	_	☐ DELETE	2.1 TITLE					nange	_	
NAME		and the second second	2.2 NAME		* *	-				
STREET ADDRESS			2.3 STRE	ETA	ADDRESS					
CITY-ST-ZIP			2. 4 CITY	-ST-	-ZIP	4				
TITLE		☐ DELETÉ	3.1 TITLE					hange	Addition Addition	
NAME			3.2 NAME	Ē						
STREET ADDRESS		-	3.3 STRE	ETA	ADDRESS					
CITY-ST-ZIP	_		3.4. CITY	·ST-	-ZIP					
TITLE		☐ DELETE	4.1 TITLE	:			□c	hange	☐ Addition	
NAME	'		4. 2 NAM	E						
STREET ADDRESS	'		4.3 STRE	ETA	ADDRESS					
CITY-ST-ZIP			4.4 CITY							
TITLE		☐ DELETE	5.1 TITLE				c	hange	Addition	
NAME			5.2 NAMI							
			5.3 STRE	ETA	ADDRESS					
STREET ADDRESS			5.4 CITY							
CITY-ST-ZIP		☐ DELETE	6.1 TITLE				ΠC	hange	☐ Addition	
TITLE		- Deceie	6.2 NAMI						==•	
NAME					ADDDEES					
OTDEET ADODESC	J		■ 6.3 STRE	:ETA	ADDRESS					

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)(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, with all other like empowered.

6.4 CITY+ST-ZIP

SIGNATURE: