PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTA ENTIOF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # POROCO77246

Principal Plac 2945 STATE R	M BOAT BLINDS, INC	M 29	failing Address 945 STATE ROAD 84 ORT LAUDERDALE F				DO NOT WRITE IN THI		
							3. Date Incorporated or Qualifed		
							09/08/1998		
2. Principal F	Place of Business	28	. Mailing Address				4. FELNumber 65-08607/5.		plied For
21		26	<u> </u>				03-000773.		Applicable
Suite, Apt.	, #, etc.	<u> </u>	Suite, Apt. #, etc.				5. Certifcate of Status Desired	\$8.75 A	
22		27	City & State				6. Election Campaign Financing	\$5.00	`
City & Stat	ile —	28					Trust Fund Contribution		
23 Zio	Country—		Zip	Col	untry		-a. This corporation owes the current year to	ntangible	·
24	25	29]	30			Personal Property Tax.	☐ Yes	□No
	9. Name and Address	of Current Regi	stered Agent		81	Name	10. Name and Address of New Registerer	i Agent	
Tomlinson, John L 500 NW 62ND STREET SUITE 455				82 Street Address (P.O. Box Number is Not Acceptable) 83					
FOF	RT LAUDERDALE FL 333		607.1508, Florida S ida. Such charge w	Statutes, the a	84 Bbove	City -named conthe corporat	poration submits this statement for the purpose of ion's board of directors. I hereby accept the appropriate the property of t		
FOF	to the provisions of Section registered agent, or both, in am familiar with, and accept Signature, typed or provide name of r	ns 607.0502 and in the State of Flor tithe obligations o	e if applicable.	(NOTE: Registered	above id by ti tutes.	named con the corporat	poration submits this statement for the purpose of ion's board of directors. I hereby accept the appeared when reinstating) DATE	f changing its plotment as re	registered pistered
11. Pursuant office or agent. I a SIGNATURE	to the provisions of Section registered agent, or both, in arm familiar with, and accept signature, typed or provide name of OFF	ns 607.0502 and in the State of Flor tithe obligations of registered agent and life FICERS AND DIR	e if applicable.	(NOTE: Registered	above- id by to tutes.	named con the corporat	poration submits this statement for the purpose of tion's board of directors, I hereby accept the app	of changing its Softment as re-	registered pistered
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lify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath; that I am an a power of the report as required by Chapter 607, Florida Statutes; and that my name appears in the all other tike empowered. 14. I hereby certify that the information supplied with this tilin indicated on this annual report or supplemental angual re officer or director of the corporation or the receiver in the Block 12 or Block 13 if changed, or on an attaching or with the corporation of the receiver in the Block 12 or Block 13 if changed, or on an attaching or with the corporation of the receiver in the supplemental than the corporation of the corpo

6.3 STREET ADDRESS

64 CUTY-ST-ZIP

SIGNATURE: _

STREET ADDRESS

Mar 04, 1999 8:00 am Secretary of State 03-04-1999 90134 004 ***150.00