

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000077748

PARK LANE SHOWERS & REMODELING, INC.

Princi	ipai Mia	ice oi	Business
18224	WEST	DEXIE	HIGHWAY

Mailing Address

FILED Mar 01, 1999 8:00 am Secretary of State 03-01-1999 90126 008 ***150.00

Fillicipal Flace	3 (1 Dagwogg	Million of Production						
		18224 WEST DIXIE HIGHWAY	Y					
AVENTURA FL	33160	AVENTURA FL 33160			DO NOT W	RITE IN THIS	SPACE	
ł					3. Date incorporated or Qualife			
					09/09/1998			
2. Principal Place of Business 2a. Mailing Address				4. FEI Number		Applied For		
				65-086	1 X PD:	Not	Applicable	
21 28 Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75 A	dditional	
——————————————————————————————————————				5. Certificate of Status Desired		Fee Rec	periup	
22 27 City & State City & State				6. Election Campaign Financia	ng	\$5.00	Vlav Re	
23 28						Added to		
Zip Country Zip			Cou	ntry	8. This corporation owes the c	urrent vear Inta	angible	
	25		30	مست مقاساً	Personal Property Tax.			□No
24	9. Name and Address of Current		<u> </u>	 	10. Name and Address of New	w Registered	Agent	
	3. Italia stip Accides of Continu	Tradition Address		81 Name V				
AME	RILAWYER				zhaz Megidish			
	ALMERIA AVENUE				ress (P.O. Box Number is Not Acces	ptable)		
	AL GABLES FL 33134			83	LAS W. PINE TH	<u>~</u>		
OUN	INE CONSTRUCTION			ا ت ا				
				84 City A			85 309	Ode
					ventura			renistered
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of Immiliar with and accept the obligations.	2 and 507.1508, Florida Statutes of Florida, Such change was auf	s, the a thorized	bove-named con i by the comorat	poration submits this statement for t ion's board of directors. I hereby so	cept the appoir	rtwent as ted	istered
agent. I a	m familiar with and accept the obligation	ions of Section 607.0505, Florid	da Slat	utes.		اءاء		
SIGNATURE		Yizhaz Y	Neg	lidish -	V. Y	2/21	49	
DIONITION 2	Signature, typed or printed name of registered agont			Agent signeture requir		DATE	D DIDECTOR	35 (1) 42
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO	JEFICERS AN	☐ Change	Addition
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Interest carry that the intermental supplied with this large loss not quality for the exemptor stated in Section 118.07(5)(i), Frontal callbasts in that a large indicated on this annual report or supplemental annual report is true and accurate and that my signature shell have the same legal effect as if made under each; 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 Slock 12 or Block 13 if changed, open an attachment with an address, with all other like empowered.