

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

0906332

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 11, 1999 8:00 am
Secretary of State

03-11-1999 90144 050 ***150.00

DOCUMENT # **P98000081355**

1. Corporation Name

A-1 DISCOUNT SIDING, INC.



Principal Place of Business

**209 FARRINGTON LANE
KISSIMMEE FL 34744**

Mailing Address

**209 FARRINGTON LANE
KISSIMMEE FL 34744**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/17/1998

4. FEI Number

59-3534760

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 **1032 PRINCESS GATE BLVD**

Suite, Apt. #, etc.

22 **WINTER PARK, FL**

City & State

23 **32792**

Zip

Country

24 **32792**

Zip

Country

25 **32792**

Zip

Country

26 **32792**

Zip

Country

27 **32792**

Zip

Country

28 **32792**

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29 **32792**

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30 **32792**

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42 **32792**

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43 **32792**

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44 **32792**

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45 **32792**

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Country

46 **32792**

Zip

Country

**LASEK, TERRENCE J
8529 THISTLE AVE
WINTER PARK FL 32792**

81 Name

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

1032 PRINCESS GATE BLVD

83

84 City

WINTER PARK

FL

85 Zip Code

32792

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **LASEK, TERRENCE J**
STREET ADDRESS **8529 THISTLE AVE**
CITY-ST-ZIP **WINTER PARK FL 32792**

TITLE **D** ☐ DELETE
NAME **LASEK, RONALD SR**
STREET ADDRESS **5410 ALBERT DRIVE**
CITY-ST-ZIP **WINTER PARK FL 32792**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

**1032 PRINCESS GATE BLVD
WINTER PARK FL 32792**

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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)(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.

SIGNATURE

TERRENCE LASEK JR

Date

Daytime Phone #

CR2E034 (11/98)