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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Aug 04 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S23062 (0) ATRIUM HOLDINGS, INC.												
Pr	incipal Plac	e of Busines	\$	_		Ма	iling Address					T 1001/010 KM (1000 (11)) ODIVA DISHE SIDI DIBIN 9191/ DIBIN 9191/ DIBIN 9191/ DEDEK 1001
1433 REYNOLDS STREET KEY WEST FL 33040						1433 REYNOLDS STREET KEY WEST FL 33040-4781						
												3. Date Incorporated or Qualified 3a. Date of Last Report 01/04/1991 05/01/1996
2. Principal Place of Business						2a. Mailing Address						4. FEI Number Applied For
21					2	Suite, Apt. #, etc.						11-2631172 Not Applicable
Suite, Apt. #, etc.					-	27						Certificate of Status Desired Status Desired Status Desired Status Desired Status Desired Status Desired
City & State					<u>_</u>	City & State				_		6. Election Campaign Financing \$5.00 May Be
Zip Country					Zip Country						Trust Fund Contribution	
24	Σiμ	· — · ·		2	9	¬			antity		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	
					of Current Registered Agent		ared Agent			т.		10. Name and Address of New Registered Agent
MAUNSBACH, KAY B.									81		Name 	
1433 REYNOLDS STREET KEY WEST FL 33040									82		Street Addre	ess (P.O. Box Number is Not Acceptable)
NET WEST PE SSON					83				 			
									84	84 City		85 Zip Code
11	11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the								he abov	e-r	named corp	oration submits this statement for the purpose of changing its registered
l ''	office or r	egistered ac	ient	or both, in the	State of El	orid.	a. Such change was Section 607.0505, F	s auth	orized b	v tl	ne corporati	ion's board of directors. I hereby accept the appointment as registered
SI	GNATURE			, i a accept the	og	,	0.00000,	101100		Ψ.		
12		Signature, typed	or pi	inted harrie of registe	ered agont and IS AND DII			OT£ Be	gistered Ag	ent	signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
111		D		OFFICER	19 AND DI	ill	DELETE		1.1 TITLE			Change Addition
NA	ME			H, KAY B.				1	1.2 NAME		Ì	
STREET ADDRESS		1433 REYNOLDS ST.							1,3 STREET ADDRESS			
_	CITY-ST-ZIP KEY WEST FL								1.4 CITY-ST-2IP 2.1 TITLE		ZIP	☐ Change ☐ Addition
NA.									2.2 NAME		i	
STA	reet add ress							ľ	2.3 STREE	I AD	DORESS	
_	Y-ST-ZIP						DELETE	_	2 4 CITY-	ST-	ZIP	Chance Addition
TITLE NAME							☐ DELETE	ı	31 THLE 32 NAME			Change Addition
	REET ADDRESS								3.3 STREE	T AD	DRESS	
CIT	Y-ST-ZIP			<i></i>					3.4. CITY -	ST-	ZIP	
1	TITLE							4.1 TITLE			Change Addition	
	ME Reet address								4. 2 NAME 4.3 STREE		MBESS !	
City-St-ZiP					4.4 CITY-ST-ZIP				I			
TIT	LE	-	☐ DELETE						5.1 TITLE			Change Addition
NAI								1	5.2 NAME			
	REET ADDRESS								5.3 STREE 5.4 City-1		- 1	
	(TY-ST-ZIP			-		DELETE 6.1 1			-10	- "	Change Addition	
NAME								6.2 NAME				
STI	REET ADDRESS								6.3 STREE			
CITY-ST-ZIP 14. I do hereby certify that the information supplied y			fw bailaar	h I hi	s filing does not au	6.4 C(TY-ST			4	In Section 119.07(3)(i), Florida Statutes. I further certify that the		
'	informatio I am an o appears i	n indicated fficer or dire n Block 12 d	on the	nis annual repo of the corporat ock 13 if charge	ort or supplication or the jed, or the	eme rece an a	ntal annual report is iver or trustee emport trachment with an a	s true owered ddres	and acc d to exec s.	ura	ite and that e this repor	t in Section 119.07(3)(i), Florida Statules. I furner certify that the my signature shall have the same legal effect as if made under oath; that as required by Chapter 607, Florida Statutes; and that my name