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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 08 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **\$28559**

(0)

UNIVERSAL ALUMINUM WINDOWS AND DOORS, INC

Principal Place of Business Mailing Address 1675 W. 31ST PLACE HALEAH FL 33012 HALEAH FL 33012				·				
US		US				3. Date incorporated or Qualified	ort	
2. Principal Place of Business 26. Mailing Addre						4. FEI Number Applie	ed For	
21		26					pplicable	
Suite, Apt #, etc. Suite, Apt #, 22						6. Certificate of Status Desired See Regul		
City & Stat	te	City & State	J			6. Election Campaign Financing \$5.00 Ma		
23		28				Trust Fund Contribution Added to F		
Ζφ	Country	Zip	Cou	ntry		8. This corporation has liability for intangible tax under s. 19	9.032,	
24	25 9. Name and Address of Curren	29	30		,	Florida Statutes Yes No 10. Name and Address of New-Registered Agent		
FFR	NANDEZ, JOSE M.	ir uedisteien wähitr		81	Name	(b) Hadre and Address of Heli-Hedrester Agent		
	5 W. 31ST PLACE			82	Ctroot Ac	ddress (P.O. Box Number is Not Acceptable)		
	EAH FL 33012			02	Street At	odress (F.O. Box Number is not Acceptable)		
				В3				
			1	84	City	85 Zip Coo	de	
	4.6	10074500 511. 0. 1.						
office or agent. La SIGNATURE.						corporation submits this statement for the purpose of changing its re- oration's board of directors. I hereby accept the appointment as reg	jistered	
12.	Signature, typod or printro name of registered ag OFFICERS AN	ent and title if applicable (NC) ID DIRECTORS	118: Registered	Ager	il signature rei	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II	N 12	
1 1) (P	DELETE	1.1 7/1	TLE	T		Addition	
MAME	FERNANDEZ, JOSE M		1.2 NA	ME				
STREET ADDRESS	1675 W. 31ST PLACE		1.3 ST	REET	ADDRESS			
C(1Y - \$1 - Z)F	HIALEAH FL		1.4 Cf	1Y - \$1	r-ZiP			
THUE	☐ DELETE			2.1 TITLE		Change [Addition	
NAM!			2.2 NA	ME				
STHEET ACTURESS			1		address	· ·		
CHT-SI-7P	,	DELETE	2. 4 C		r-ZIP	Change [Addition	
TITLE NAME		L DELETE	3.2 NA		,	LJ Orkinge L.	Addition	
STREET ADDRESS					ADDRESS			
C-TY ST-ZIP			3.4. C		1		ļ	
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STREET ADDRESS			4.3 ST	REET	ADDRESS	•		
CITY - ST - ZIP			4.4 CF	TY-\$1	-ZIP			
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NAME:			5.2 NA					
STREET ADDRESS					ADDRESS			
CHY-SI-7/2		DELETE	5.4 Cl		-ZIP	T Change I	Addition	
1:TLF		ר ו הנדגונ	6.1 TII 6.2 N/		\			
NAME expect armodes					*DUBECC	900002183409 c -05/19/9701122032 c	5	
STREET ADDRESS			0.3 51	nee I	address	-U3/13/3(U1122U32 <i>2</i>	10/107	

14. It do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Forida 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.

SIGNATURE: