## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

S37943

(5)

RO-PAT HOME IMPROVEMENT, INC.											
Principal Place of Business 497 NW 70TH WAY MARGATE FL 33063			Maling Address 497 NW 70TH WAY MARGATE FL 33063					EMP (E)) MINSE		IŞT ATĞIN BINSI TANI	
								3. Date incorporated or Qualified 03/11/1991	3a. Da	e of Last R 04/04/19	
2. Puncipal Place of Business			2a. Mailing Address					4. FEI Number Applied For			
21			26					65-0249798   Not Applicable   \$8.75 Additional			
Suite, Apt	#, etc.	27	Suite, Apt. #. etc.					5. Certificate of Status Desired			Additional Required
City & State			Oty & State			14.51		6. Election Campaign Financing			<b>0</b> мау Ве
23		28						Trust Fund Contribution			d to Fees
Zip	Country		Zip Coun					8. This corporation has liability for	ntangible	tax under s	199.032,
24	25	29		30				Florida Statutes Yes  10. Name and Address of New F	□ No	l Amont	
	g, Name and Address of Curre	ent Hegis	tered Agent		81	Name		10. Name and Address of New F	tegisterec	Agent	
MANIO	COUNCE DODEDT N. ID										
VANDERHOOF, ROBERT N., JR. 497 NW 70TH WAY					82	Street Add		ess (P.O. Box Number is Not Acceptab	ole)		
	ATE FL 33063			Ì	В3	-	<del></del>			·····	
					84	City			FI	85 Zı	p Code
familiär wi SIGNATURE	th, and accept the obligations of, Son	otion 607.	0505, Florida Statutes	i O'E Fasymbood				d of directors. Thereby accept the app	DATE		
12.	OFFICERS A	ND DIREC		13.			т	ADDITIONS/CHANGES TO OFF	ICERS AN	D DIRECTO  Change	ORS IN 12  Addition
TIEF	D VANDERHOOF, ROBERT N	J ID	T DEFETE	1 1 TI 1 2 NA						C Overige	
NAME SUREET ADDRESS	497 NW 70TH WAY	1, 571				ADDRESS					
C1r-S1-77	MARGATE FL					1 - 20°					
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SUBSET ADDRESS				2351	REET	ADDRESS					
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I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 chapted, or on an attachment with an apprecia-Robert N VANDENDOSF J- 2/16/96 954-978-8616 SIGNATURE: Role No Typed OR PRINTED NAME OF SIGNAND OF