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

PROFIT CORPORATION ANNUAL REPORT

1998



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S51396

(7)

WINDOWS, DOORS & MORE, INC.

Jan 20 1998 8:00am										
Secretary of State										

EII ED

Principal Place	e of Business		М	Mailing Address						*1011 010	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
4830 SW 87 AVE.				4830 SW 87 AVE.									
MIAMI FL 33165				IIAMI FL 33165					DO NOT WRITE IN THIS	SPACE			
									3. Date Incorporated or Qualified				
									05/08/1991				
2. Principal Pl	ace of Business		2a.	2a. Mailing Address					4. FEI Number Applied For				
21				26					65-0263912 Not Applicab				
Suite, Apt. #, etc.				Suite, Apt. #, etc.				•	5. Certificate of Status Desired			dditional	
22				27					B. Continued of Change Desired		ee Rec	·	
City & State				City & State					6. Election Campaign Financing			Мау Ве	
23		28	44 · · · · · · · · · · · · · · · · · ·					Trust Fund Contribution L			o Fees		
Ζφ	<u></u>	Country	-	Zip	Country				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
24 25 25 26 Name and Address of Curren				29 30 and Agent					Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent				
			in Nogia	Marie Agon		81	Ţ	Name	10. Harro and received of rich fingle-core				
	RK, EDWARD /	٩.					L						
	0 SW 87 AVE.			82 Str			1	Street Addre	ddress (P.O. Box Number is Not Acceptable)				
MIA	MI FL 33165					83	╁						
							1_						
						84		City	FL	85	Zip C	2ode	
11 Pursuant t	to the provisions	of Sections 607 05	02 and 6	07.1508. Florida !	Statutes.	the abov	Δ Έ	named corp	oration submits this statement for the purpose of	f chang	ging its	registered	
office or re	ogistered agent, (or both, in the State	e of Flori	ida. Such change	was auth	norized bi	v t	the corporati	ion's board of directors. I hereby accept the app	ointme	nt as r	registered	
	m t a mılıar witti, ar	л о в осерт иле орну	gations o	i, Section bur.ust	Jo, Fiona	a Siaiule	8.						
SIGNATURE	Signature, typed or per-	ilad hamo of registered as	gest and tile	of applicable	(NOIL B	ogistered Ag	rint	t signature require	ed when reinstating) DATE				
12.		OFFICERS AN	ND DIREC	CTORS		13.			ADDITIONS/CHANGES TO OFFICERS AN) DIRE	CTOR		
TITLE	P			☐ DELET	E	1.1 TITLE				∐ Ch	ange	Addition	
NAME	CLARK, EDW	/ARD A				1.2 NAME							
STREET ADDRESS	4830 SW 87	AVE				1.3 STREE	ΤAI	DDRESS					
CITY-ST-ZIP	MIAMI FL					1.4 CITY-S	SI-	- ZIP					
TITLE				☐ DELET	E	2.1 TOLE				∐] Ch	ange	Addition	
NAME						2.2 NAME							
STREET ADDRESS						2.3 STREET	A	DDRESS	,				
CITY-S1-ZIP						2. 4 CITY-	\$1	-ZIP				Addition	
TITLE				☐ DELET	t	3.1 TITLE				∐ Ch	ange	L ADDITION	
NAME						3.2 NAME							
STREET ADDRESS						3.3 STREET		1					
CITY-S1-ZIP				DELET		3.4. CITY -	SI-	- ZIP		☐ Ch		Addition	
TITLE				□ DECE	E	4.1 TITLE					any.	[
NAME						4. 2 NAME		PDD CC					
STREET ADDRESS						4.3 STREE							
CITY-ST-ZIP				DELET	F	4.4 CITY - 5 5.1 TITLE	51-	711		☐ Ch	ange	Addition	
TITLE						5.2 NAME							
NAME OTOTEX ADODECE						5.3 STREE	LAI	DUBECC					
STREET ADDRESS						5.4 CITY - 5							
CITY-S1-ZIP TITLE				DELET	É	6.1 TITLE	31.	· Z0		Ch	ange	Addition	
NAME						6.2 NAME				_	v		
STREET ADDRESS						6.3 STREE		INDRESS.					
CITY-ST-ZIP						6.4 C(1Y - 5							
44 Lhoroby c	certify that the info	ormation supplied	with this	filing does not qu	alify for the	he exemn	atic	on stated in S	Section 119.07(3)(i), Florida Statutes. I further c	ertify th	at the	information	
indicated officer or i	on this annual re director of the co	a vort or supularizen	ital arinua ceiver or	al report is true an trustee empowere	id accura	ate and th	ıat	t my sionátur	re shall have the same legal effect as if made ul uired by Chapter 607, Florida Statules; and that	ider oa	m: ma	it Lam an	

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