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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Mailing Address Mailing Address South K 2 CT POMPANO BEACH R, 33062 1129	ARCHIT	MENT # V13319 ECTURAL DOOR CO, INC	9 (1)								M
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280 IN E 23 CT. POMPANO BEACH FL 82 Street Address (P.O. Box Number is Not Acceptable) 83 City 84 City FL 85 Zip Coc 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes. The abord-named corporation submits this statement for the purpose of changing its red organized agent, or both, in the State of Florida. Such change was authorised by the corporation's board of directors. Thereby accept the appointment as reg agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature inpedia injuried rame of regained audit of approach. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN INTERESTORS. ITHE D Change ITHE D LEETE 11 TIME DELETE 11 TIME DELETE 21 TIME DELETE 21 TIME Change CHY-S1-ZP THE DELETE 31 TIME Change Change CHY-S1-ZP THE DELETE 31 TIME Change Chang				190							
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11. Pursuant to the provisions of Sections 607 (506) and 607 (506). Florida Statutes, the above named corporation submits this statement for the purpose of changing its red office or trigistent 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 red agent. I am familiar with, and accept the obtigations of, Section 607.0505, Florida Statutes. SIGNATURE				84	C	City		FL	85 Zi	p Code	
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14. I do 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 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 attaching my and address.	14. I do hereb	by certify that the information suppli	ed with this filing does not quali	for done the many		tion stated	in Section 119.07(3)(i), Florida Statute	s. I furthe	r certify the	at the	ath. th-

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Feb 18 1997 8:00am

Secretary of State