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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90068 041 ***150.00

DOCUMENT # V39701

AIRFLO GARAGE DOOR SCREENS, INC.

Principal Place	e of Business	Mailing Addin	628							
1673 CATTLEM	EN RD	1673 CATTLEI	Men RD			{				
SARASOTA FL	34232	SARASOTA FI	L 34232				DO NOT WOL	C IN THIS C	DACE	
VS		· US					DO NOT WRIT	E IN I I II S	PAUE	
							orated or Qualifed			
· · ·						05/29/19 4. FEI Number				Acalled Co.
2. Principal P	lace of Business	2a. Mailing A	adress						\vdash	Applied For
21		26				65-03374	198		60.7	Not Applicable
Suite, Apt.	#, etc.	Suite, Ap	t. #, etc.			5. Certifcate of	f Status Desired			5 Additional Required
City & State	e :	City & St	ate -			6. Election Car	mpaign Financing	·	\$5.0	00 May Be
23		28				Trust Fund			•	ed to Fees
Zip	Country	Zip		Country	<i>y</i>	8. This corpora	ation owes the curre	ent year Intai	ngible	
24	25	29	30	٥		Personal Pro	operty Tax		7 Yes	□No
	9. Name and Address of Ci	urrent Registered Age	nt	T.		10. Name and	Address of New R	egistered A	gent	
				81	Name					ł
	rra, carl			82	Street A	address (P.O. Box Nur	ober is Not Accepta	ble)		
1673 CATTLEMEN RD					Jueera	Street Address (P.O. Box Number is Not Acceptable)				
SAR	ASOTA FL 34232			83						
				84	City			FL	85 Z	Lip Code
	to the provisions of Sections 607				<u>}</u>		toto		hanging	ite registered
office or c	-anistored agent of both in the S	State of Florida, Such cl	tille sew anner	oonzed by	, the comor	ration's board of direct	ors. I hereby accep	t the appoint	ment as	registered
agent. i a	m familiar with, and accept the o	obligations of, Section 6	07.0505, Florid	la Statute	S.					[
SIGNATURE	m familiar with, and accept the o		07.0505, Florid	a Statute	s.	quired when reinstating)		DATE	<u>-</u>	
	Signature, typed or printed name of registers		07.0505, Florid	a Statute	s.		CHANGES TO OFF			
SIGNATURE	Signature, typed or printed name of registers OFFICER	ed agent and title if applicable.	07.0505, Florid	a Statute:	s.		CHANGES TO OFF		DIREC	
SIGNATURE	Signature, typed or printed name of registers OFFICER	ed agent and title if applicable.	(NOTE: R	egistered Age	s. ent signature rec		CHANGES TO OFF			
SIGNATURE 12. TITLE	Signature, typed or printed name of registers OFFICER	ed agent and title if applicable.	(NOTE: R	egistered Age 13. 1.1 TITLE 1.2 NAME	s. ent signature rec		CHANGES TO OFF			
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed of printed name of registers OFFICER D SFERRA, CARL	ed agent and title if applicable.	(NOTE: R	egistered Age 13. 1.1 TITLE 1.2 NAME	s. Int signature rec		CHANGES TO OFF		Chan	ge Addition
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14. I 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 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, with all other like empowered.

SIGNATURE:



(941) 377-0199