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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	MENT # V40845 Installation, Inc.	(2)		E 10200 ETORON ETORON COMO ACUAN ACUAN ACUAN	DIDIK BARK KITKI DIJAK DIDIK BIDIK 1801
D: ::-10:	I F1	NA COLOR DISTRICT			
Principal Place of Business Mailing Address 4001 BUTLER ROAD 4001 BUTLER ROAD					
COCONUT CRE		COCONUT CREEK FL 3307	3		
				3. Date incorporated or Qualified	3a. Date of Last Report
				06/01/1992	04/26/1996
2. Principal Place of Business		2a, Mailing Address		4, FEI Number	Applied For
Suite, Apt #, etc.		Suite, Apt. #, etc.		65-0340689	Not Applicable \$8.75 Additional
22		27		6. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	ntangible tax under s. 199.032, Yes No
24	25 Name and Address of Curren	29 t Registered Agent	30	10. Name and Address of New Re	
RAN	D. LEROY F.		81 Name		
4004 PLATED DOAD			82 Street Addre	ess (P.O. Box Number is Not Acceptab	la)
COCONUT CREEK FL 33073			or our ridgi	oos (i .c. cox reminor la riot riocopida	
			83		
			84 City		85 Zip Code
a. D	As the province of Continue CO7 050	2 and CO7 1509 Florida Ptotut	ha tha shawa namad sara	eration submits this statement for the p	FL 69 Zip Code
office or re	egistered agent, or both, in the State	of Florida. Such change was a	authorized by the corporati	oration submits this statement for the p ion's board of directors. I hereby accep	t the appointment as registered
	m tamiliar with, and accept the obliga	itions of, Section 607.0505, Fig	orina Statutes.		
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable (NOT	E: Registered Agent signature require	ed when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	D I FROM E	DELETE	1.1 TITLE		Change Addition
NAME DEDES CANDOSCO	rand, Leroy F. 4001 Butler Road		1.2 NAME		
STREET ADDRESS City-St-7ip	COCONUT CREEK FL		1.3 STREET ADDRESS 1.4 City-St-Zip		
Till!	CODONOT ORELITE	DELETE	2.1 T/TLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-S1-7IP			2.4 CITY-ST-ZIP		
TOTALE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ACIDRESS			3 3 STREET ADDRESS		
CITY: ST: ZIF		☐ DELETE	3.4. CITY+ST-ZIP 4.1 TITLE		Change Addition
TITLE NAME		□ bttire	4. 2 NAME		Car onunge Car received
STREET ADDRESS			4.3 STREET ADDRESS		
City - \$1-ZiF			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			54 CITY-ST+ZIP	·	
TITLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		1

6.4 CITY - ST - ZIP

SIGNATURE:

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 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 18 if changed erron-an attachment with an address.

FILED

Apr 28 1997 8:00am

Secretary of State