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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name

Principal Place of Business

NAME

STREET ADDRESS

DOCUMENT # **V42296**

SECURITY ROLLING SHUTTERS CO., INC.



Secretary of State DIVISION OF CORPORATIONS

FLORIDA DEPARTMENT OF STATE Katherine Harris

FILED May 06, 1999 8:00 am Secretary of State 05-06-1999 90235 032 ***150.00

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	ELEKT INCH BILL BILL	UIQIA 31811 BIQII :	

13037 GULF BL UNIT 526	VD	13037 GULF BLVD UNIT 526					÷
MADEIRA BEAC	CH FL 33708	MADEIRA BEACH FL 33708			DO NOT WRITE IN T	HIS SPACE	
US		US			3. Date Incorporated or Qualifed 06/05/1992		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied	d For
21		26			59-3125826	Not Ar	pplicable
Suite, Apt.	# etc	Suite, Apt. #, etc.				\$8.75 Addi	
	#, etc.	— — · · · ·			5. Certifcate of Status Desired	Fee Requir	
22		27				- _	
City & State	e ·	City & State			6. Election Campaign Financing	\$5.00 May	
23					Trust Fund Contribution	Added to Fe	ees
Zip	Country	Zip	_ Country	,	8. This corporation owes the current year		
24	25	29 36	0		Personal Property Tax.	Yes 🔲	No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Register	ed Agent	
	Tall leve via th		81	Name			
PRZ\	yborowski, andrew						
	13TH AVE NE		82	Street Add	ress (P.O. Box Number is Not Acceptable)		
	49TH STREET N., SUITE 406-5		83	-			
	PETERSBURG FL 33701	•	03				
31 6	ETENOPÓNO LE 2010 I		84	City		85 Zip Code	e
				,		=L °°	
office or r	to the provisions of Sections 607.05 registered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was auth	ionzed by	the corporati	poration submits this statement for the purpose ion's board of directors. I hereby accept the ap	of changing its registe op on the contract of	istered ered
SIGNATURE		(NOTE: Pe	aistered Asse	at nimpature contilir	ed when reinstating) DATE		
40	Signature, typed or printed name of registered age	ND DIRECTORS	13.	it signature require	ADDITIONS/CHANGES TO OFFICERS		IN 12
12.	, , , , , , , , , , , , , , , , , , , 	DELETE			ADDITIONS/CHANGES TO OFFICE NO.		Addition
TITLE	P ADTUDO DO MICHE AND DEAL	- Detere	1.1 TITLE				
NAME State	PRZYBOROWSKI, ANDREN		1.2 NAME				
STREET ADDRESS			1.3 STREE	TADORESS			
CITY-ST-ZIP	ST. PETERSBURG FL	•	1.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	2.1 TITLE			Change [☐ Addition
NAME			2.2 NAME				
	•			T ADDRESS			i
STREET ADDRESS	,						1
CITY-ST-ZIP			2.4 CITY-S	ST-ZIP		Change [Addition
TITLE		DELETE	3.1 TITLE			□ cuanão £	~~~
NAME	l		3.2 NAME				
STREET ADDRESS			3.3 STREE	TADORESS			
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP			
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			4.3 STREE	LADDDECC			
STREET ADDRESS	}						
CITY-ST-ZIP	<u> </u>		44 CITY S	T-ZIP		☐ Change [Addition
TITLE		☐ DELETE	5.1 TITLE	ļ		□ cuati∂a F	
NAME			5.2 NAME	Ì			
STREET ADDRESS	·		5.3 STREE	T ADDRESS			į
CITY-ST-ZIP	·t		5.4 CITY-S	T-ZIP			
TITLE		DELETE	6.1 TITLE			Change [Addition

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 attackment with an agrees, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE: