SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Aug 05 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** (9) 1. Corporation Name INDEPENDENT INSTALLATIONS, INC. Principal Place of Business Mailing Address 3807 78TH AVE CIR E 3807 78TH AVE CIR E SARASOTA FL 34249 SARASOTA FL 34243 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/10/1992 2. Principal Place of Business 2a. Mailing Address 4. FÉI Number Applied For 21 26 65-0326832 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 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 owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. _ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name UMBAUGH, MARK 3807 78TH AVE CIR E **B2** Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34243 83 84 City Zip Code Pursuant to the provisions of sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered 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 registered agent. I am familiar with, and accept the obligations of section 607.0505. Florida Statutes SIGNATURE Signature, typed or printed name of registered agent a we never Received

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4150' Thank You. CR2E034 (5/98) OFFICERS AND INS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. TITLE D Change Addition UMBAUGH, MARK NAME STREET ADDRESS 3807 78TH AVE CIR E SARASOTA FL CITY-ST-ZIP TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIF TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP TITLE 5.1 TITLE DELETE 8000026094**279** Addition NAME 5.2 NAME -08/06/98--01053-**-0**41 STREET ADDRESS 5.3 STREET ADDRESS ***150.00 CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE 6.1 TITLE DELETE 62 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 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.

FILED

941-351-4800: