FILED Apr 16 1998 8:00am Secretary of State

	JAL REPORT	Secretary of DIVISION OF CO		Secretary	y of State
	MENT # V6458 3	· (·)			
ACREAC	ge aluminum & Screen,	INC.			
Principal Place of Business 410 BUSINESS PARKWAY SUITE 119 ROYAL PALM BEACH FL 33411 US		Mailing Address 410 BUSINESS PARKWAY SUITE 119 ROYAL PALM BEACH FL 33411 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/17/1992	
2. Principal Place of Business 21		28. Mailing Address 26. 250 Busine	ss Parkvacy	4. FEI Number 65-0356848	Applied For Not Applicable
Suite, Apt. :		Suite, Apt. #, etc. 27 Suite. # 4		5. Certificate of Status Desired	Fee Required
City & State		28 Roya (Palm B		Election Campaign Financing Trust Fund Contribution	
Zip 24	Country 25 9, Name and Address of Currer	zip 33411 3	Country Country	This corporation owes or has paid the Personal Property Tax due June 30. Name and Address of New Regist	☐ Yes ☐ No
PARKER, GERALD W. 12880 56 PL N ROYAL PALM BEACH FL 33411			81 Name 82 Street Addre 83 84 City	ess (P.O. Box Number is Not Acceptable)	85 Zip Code
11. 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 and title if applicable [NOTE: Registered Agent algorithm registered] DATE					
12.	Signature typed or printed name of registered ago OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE NAME STREET ADORESS	PD PARKER, GERALD W. 12860 56TH PLACE N ROYAL PALM BEACH FL	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	NOTAL FALM BENOTITE	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		Change Addition
TITLE NAME STREET ADDRESS		☐ DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 City-St-Zip		Change Addition
TIFLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS		☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS		☐ Change ☐ Addition

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

PROFIT CORPORATION

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 chapted, or on an attachment with an address.

SIGNATURE: X

4-9-98

561-788-5489