

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 JUL -6 PM 3:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V69346**

(7)

1. Corporation Name

ALL DADE WINDOWS & GLASS, INC.

Principal Place of Business

**4520 S.W. 5TH STREET
MIAMI FL 33134**

Mailing Address

**4520 S.W. 5TH STREET
MIAMI FL 33134**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/05/1992

3a. Date of Last Report

09/07/1994

4. FEI Number

65-0358752

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 189.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 15101 NW 89 Place

2a. Mailing Address

26 15101 NW 89 Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Miami, FL

City & State

28 Miami, FL

Zip Country

24 33016 Dade

Zip Country

29 33016 Dade

30 Dade

9. Name and Address of Current Registered Agent

**SOTERO, EDWARD
4520 S.W. 5TH STREET
MIAMI FL 33134**

10. Name and Address of New Registered Agent

81 Name

Edward Sotero

82 Street Address (P.O. Box Number is Not Acceptable)

15101 NW 89 Place

83

84 City

Miami

85 FL

Zip Code

33016

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]

(NOTE: Registered Agent signature required when reinstating)

6-20-95

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	SOTERO, EDWARD
STREET ADDRESS	4520 S.W. 5TH STREET
CITY - ST - ZIP	MIAMI FL 33134
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	Edward Sotero
1.3 STREET ADDRESS	15101 NW 89 Place, Miami, FL 33016
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	600001533046
2.3 STREET ADDRESS	-07/10/95--01019--004
2.4 CITY - ST - ZIP	*****225.00 *****225.00
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-20-95

Date

873-6400

Typed Name