2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOCUMENT # P98000042736 1. Entity Name 05 JAN -6 PM 1:29 J & D WINDOW CORP. SECRETARY OF STATE TALLAHASSEE, FLORIDA Mailing Address Principal Place of Business 11800 S.W. 206TH ST. 11800 S.W. 206TH ST. MIAMI:FL 33177 MIAMI FL 33177 2. Principal Place of Business 3. Mailing Address Suite. Apt. #, etc. Suite, Apt. #, etc. CR2E034 (4/04) City & State City & State 4. FEI Number 65-0835196 Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DURAN, JUAN A Street Address (P.O. Box Number is Not Acceptable) 11800 S.W. 206TH ST. **MIAMI FL 33177** Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and little # applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 DUE BY September 8, 2004 S.507.193(2)(b), F.S., allows for the waiver of the \$400.00 9. Election Campaign Financing. \$5.00 May Be late fee. By checking this box, the corporation certifies it Trust Fund Contribution. Make Check Payable to Florida Department of State did not receive prior notice. Fee to file is \$150.00. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. ☐ Delete TITLE IIILE NAME DURAN, JUAN A NAME STREET ADORESS STREET ADDRESS 11800 SW 206 ST. MIAMI FL 33177 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE DURAN, DEYANIRA NAME NAME 11800 SW 206 ST. STREET ADDRESS STREET ADDRESS MIAMI FL 33177 CITY-ST-ZIP CITY-ST-ZIP . Change ___ Addition_ TITLEDelete.... NAME OTANO, PEDRO NAME STREET ADDRESS STREET ADDRESS 11955 S.W.-189 ST. CITY-ST-ZIP CITY-ST-ZP MIAMI FL 33177 ☐ Delete ☐ Change ☐ Addition TITLE DELGADO, ARIEL NAME 19620 S.W. 115 AVE. STREET ADDRESS STREET ADDRESS MIAMI FL 33157 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ■ Addition TITLE NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE □ Delete mn F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 60?, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NEVER RECIEVE PAPER WORK

PAIL CHECK AND YOU

PUT IN WRONG ACOUNT.

THANK-YOU FOR

YOUR HELP

After Speaking W/ Juan, Both reports

For - 5 & b window corp and 5 Duran window

Corp were movered at the same time w/ Separate

Checks - Both checks were applied to

Checks - Both checks were applied to

J. Duran window: 5 & window Corp.; Ar
J. Duran window: 5 & Window Corp.; Ar
was returned for Fee.