

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J05076

**Entity Name:** A-LYNN'S WINDOW SERVICES, INC.

**Current Principal Place of Business:**

400 NORTH STREET  
SUITE 168  
LONGWOOD, FL 32750

**Current Mailing Address:**

400 NORTH STREET  
SUITE 168  
LONGWOOD, FL 32750 US

**FEI Number:** 59-2933846

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CADENAS, LUIS  
400 NORTH ST  
STE 168  
LONGWOOD, FL 32750 US

*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.*

**SIGNATURE:** LUIS CADENAS

01/08/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           PTS  
Name           CADENAS, LUIS  
Address        1261 AVALON BLVD  
City-State-Zip: CASSELBERRY FL 32707

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** LUIS CADENAS

OWNER

01/08/2019

Electronic Signature of Signing Officer/Director Detail

Date