

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000100013

**Entity Name:** ASSURED STORM WINDOW CORP.

**Current Principal Place of Business:**

319 SW 13TH AVE  
POMPANO BEACH, FL 33069

**Current Mailing Address:**

319 SW 13TH AVE  
POMPANO BEACH, FL 33069

**FEI Number: 82-3843074**

**Certificate of Status Desired: No**

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

FERRARI, GRAZIANO  
319 SW 13TH AVE  
POMPANO BEACH, FL 33069 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name FOTI, EDGARDO  
Address 1421 SOUTHWEST 17TH STREET  
City-State-Zip: BOCA RATON FL 33486

Title CEO  
Name FERRARI, GRAZIANO  
Address 20821 SONETO DR.  
City-State-Zip: BOCA RATON FL 33433

*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: EDGARDO FOTI**

**OWNER/OPERATOR**

**04/25/2023**

Electronic Signature of Signing Officer/Director Detail

Date