2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000048180

Entity Name: CLASSIC WINDOW FASHIONS INC.

Current Principal Place of Business:

3520 INVESTMENT LANE STE 1 WEST PALM BEACH, FL 33404

Current Mailing Address:

3520 INVESTMENT LANE STE 1 WEST PALM BEACH, FL 33404 US

FEI Number: 65-0422276

Name and Address of Current Registered Agent:

MARINO, JOSE MARTIN 5968 MICHAUX ST BOCA RATON, FL 33433 US

above named antity symptotic this statement for the sympton of changing its registered affice or registered agent, or both in the State of Elevid

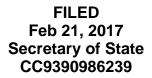
| The above named | d entity submits this statement for the purpose of changing it | s registered office or regis | tered agent, or both, in the State of Flo | rida. |
|-----------------|--|------------------------------|---|------------|
| SIGNATURE | : JOSE MARTIN MARINO | | | 02/21/2017 |
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Dire | ctor Detail : | | | |
| Title | PRESIDENT | Title | VP | |
| Name | VILLATE, LISA | Name | VILLATE, ANTHONY | |
| Address | 1423 SUMMER AVE. | Address | 3520 INVESTMENT LANE | |
| City-State-Zip: | JUPITER FL 33469 | City-State-Zip: | STE 1 WEST PALM BEACH FL 33404 | 1 |
| Title | TREASURER | | | |
| Name | VILLATE, ANTONIO | | | |
| Address | 1423 SUMMER AVE | | | |
| City-State-Zip: | JUPITER FL 33469 | | | |

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.

Ρ

SIGNATURE: LISA VILLATE

Electronic Signature of Signing Officer/Director Detail



Certificate of Status Desired: No

02/21/2017 Date