

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005194

FILED
Mar 18, 2011
Secretary of State

Entity Name: POMA GLASS & SPECIALTY WINDOWS, INC.

Current Principal Place of Business:

365 MCCLURG STREET E
BOARDMAN, OH 44513

New Principal Place of Business:

Current Mailing Address:

C/O LAW DEPT., 2201 WATER RIDGE PARKWAY
SUITE 400
CHARLOTTE, NC 28217

New Mailing Address:

FEI Number: 34-1586638

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: ISHIKO, MAREHISA
Address: 11175 CICERO DRIVE, SUITE 400
City-St-Zip: ALPHARETTA, GA 30022

Title: VD
Name: MARTIN, SERGE
Address: 11175 CICERO DRIVE, SUITE 400
City-St-Zip: ALPHARETTA, GA 30022

Title: VCFO
Name: SAKO, KAZUHIRO
Address: 11175 CICERO DRIVE, SUITE 400
City-St-Zip: ALPHARETTA, GA 30022

Title: VS
Name: CORRENTI, CHRISTOPHER F
Address: 11175 CICERO DRIVE, SUITE 400
City-St-Zip: ALPHARETTA, GA 30022

Title: AS
Name: MORENO, KATHLEEN
Address: 11175 CICERO DRIVE, SUITE 400
City-St-Zip: ALPHARETTA, GA 30022

Title: D
Name: MORIYAMA, KENZO
Address: 11175 CICERO DRIVE, SUITE 400
City-St-Zip: ALPHARETTA, GA 30022

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: KATHLEEN MORENO

AS

03/18/2011

Electronic Signature of Signing Officer or Director

Date