2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Mar 21, 2000 8:00 am Secretary of State **DOCUMENT # F37372** 1. Entity Name SUN AIR WINDOWS & INSTALLATION INC. 03-21-2000 90045 011 ***150.00 Principal Place of Business Mailing Address 16760 NW 42 AVENUE 16760 NW 42 AVENUE MIAMI FL 33055 MIAMI FL 33055-4402 UVUSIASU 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2108479 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LANZ, EDUARDO D Street Address (P.O. Box Number is Not Acceptable) 16760 NW 42 AVE. MIAMI FL 33055 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. SD TITLE ☐ Change Addition TITLE Delete DIAZ, EMELINA NAME NAME STREET ADDRESS STREET ADDRESS 16760 NW 42 AVENUE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Change ☐ Addition ☐ Delete TITLE TITLE **EMERICK DIAZ** NAME STREET ADDRESS 16760 NW 42 AVE STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP MIAMI FL ☐ Change ■ Addition SD ☐ Delete TITLE DIAZ.-EMIL NAME NAME STREET ADDRESS STREET ADDRESS 16760 NW 42 AVE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Change Delete Addition TITLE DIAZ. EDUARDO M JR NAME STREET ADDRESS STREET ADDRESS 16760 NW 42 AVE. CITY-ST-ZIP CITY-ST-ZIP MIAM! FL ☐ Delete TITLE ☐ Change ☐ Addition TITLE DIAZ, EDMUNDO O NAME NAME STREET ADDRESS 16760 NW 42 AVE. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Change ☐ Addition ☐ Delete TITLE TITLE LANZ, EDUARDO D NAME NAME STREET ADDRESS STREET ADDRESS 16760 NW 42ND AVE CITY-ST-7/P CITY-ST-7IP 13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an addless, with all other like empowered.

03-14-2000

TEO NAME OF SIGNING OFFICER OR DIRECTOR

EDUARDO D LANZ

Daytime Phone #

CR2E034 (9/99)