

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H41081

FILED
Mar 19, 2009
Secretary of State

Entity Name: ENGINEERED AWNING FRAMES, INC.

Current Principal Place of Business:

C/O LOUIS KING
3905 NW 31 AVENUE
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

C/O LOUIS KING
3905 NW 31 AVENUE
MIAMI, FL 33142

New Mailing Address:

FEI Number: 59-2499200 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KING, LOUIS, G
3905 NW 31 AVENUE
MIAMI, FL 33142 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: KING, LOUIS G.,
Address: 3905 NW 31 AVENUE
City-St-Zip: MIAMI, FL 33142

Title: D () Delete
Name: DIPERSICO, DALE, A,
Address: 520 NOTTINGHAM BLVD
City-St-Zip: W PALM BEACH, FL

Title: SD () Delete
Name: CARROLL, JAMES
Address: 844 NW 9TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D () Delete
Name: REILLY, MICHAEL
Address: 3905 NW 31 AVENUE
City-St-Zip: MIAMI, FL 33142

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL REILLY

D

03/19/2009

Electronic Signature of Signing Officer or Director

_____ Date