

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J72631

FILED
Jan 04, 2005
Secretary of State

Entity Name: AAA ALUMINUM DOOR & WINDOW, INC.

Current Principal Place of Business:

6207 GEORGIA AVE.
W. PALM BEACH, FL 334053917

New Principal Place of Business:

Current Mailing Address:

6207 GEORGIA AVE.
W. PALM BEACH, FL 334053917

New Mailing Address:

FEI Number: 59-2815710

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MIHALKO, CRAIG
605 MAPLEWOOD DRIVE
WEST PALM BEACH, FL 33415 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: DP () Delete
Name: MIHALKO, CRAIG,
Address: 605 MAPLEWOOD DRIVE
City-St-Zip: WEST PALM BEACH, FL 33415

Title: VPD () Delete
Name: DE LA CRUZ, WALTER
Address: 2959 GENOA PLACE
City-St-Zip: WEST PALM BEACH, FL 33406

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: WALTER DE LA CRUZ

VPD

01/04/2005

Electronic Signature of Signing Officer or Director

Date