

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000119728

**FILED**  
**Sep 13, 2008**  
**Secretary of State**

**Entity Name:** WINDOWS & WATERPROOFING, LLC

**Current Principal Place of Business:**

17152 NW 87 CT  
HIALEAH, FL 33018 US

**New Principal Place of Business:**

10000 NW 135 ST  
HIALEAH, FL 33018 US

**Current Mailing Address:**

17152 NW 87 CT  
HIALEAH, FL 33018 US

**New Mailing Address:**

10000 NW 135 ST  
HIALEAH, FL 33018 US

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

LOPEZ, YOHANDRY  
17152 NW 87 CT  
HIALEAH, FL 33018 US

**Name and Address of New Registered Agent:**

LOPEZ, YOHANDRY  
1000 NW 135 ST  
HIALEAH, FL 33018 US

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: YOHANDRY LOPEZ

09/13/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LOPEZ, YOHANDRY  
Address: 17152 NW 87 CT  
City-St-Zip: HIALEAH, FL 33018 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: LOPEZ, YOHANDRY  
Address: 10000 NW 135 ST  
City-St-Zip: HIALEAH, FL 33018 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: YOHANDRY LOPEZ

MGRM

09/13/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date