

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000055125

FILED
May 03, 2010
Secretary of State

Entity Name: BEST WINDOW AND SCREEN INDUSTRIES, LLC

Current Principal Place of Business:

1805 S POWERLINE RD
101
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

420 NORTH STATE ROAD 7
PLANTATION, FL 33317

Current Mailing Address:

1805 S POWERLINE RD
101
DEERFIELD BEACH, FL 33442

New Mailing Address:

420 NORTH STATE ROAD 7
PLANTATION, FL 33317

FEI Number: 26-2744007 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **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:

GRANJA, PATRICIO A
1805 S POWERLINE RD
101
DEERFIELD BEACH, FL 33442 US

Name and Address of New Registered Agent:

GRANJA, PATRICK
420 NORTH STATE ROAD 7
PLANTATION, FL 33317 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: PATRICK GRANJA

05/03/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: GRANJA, PATRICK
Address: 420 NORTH STATE ROAD 7
City-St-Zip: PLANTATION, FL 33317

Title: MGRM
Name: GRANJA, MONICA S
Address: 420 NORTH STATE ROAD 7
City-St-Zip: PLANTATION, FL 33317

Title: MGR
Name: GRANJA, PAUL A
Address: 420 NORTH STATE ROAD 7
City-St-Zip: PLANTATION, FL 33317

Title: MGR
Name: GRANJA, DANIELA
Address: 420 NORTH STATE ROAD 7
City-St-Zip: PLANTATION, FL 33317

I hereby 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: PATRICK GRANJA

MGRM

05/03/2010

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