

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000019119

FILED
Apr 29, 2004
Secretary of State

Entity Name: A.B.C. PROFESSIONAL WINDOW TINTERS OF FLORIDA, INC.

Current Principal Place of Business:

2075 S.W. 122ND AVENUE
SUITE 230
MIAMI, FL 33175

New Principal Place of Business:

3143 NW 29TH STREET
MIAMI, FL 33142

Current Mailing Address:

2075 S.W. 122ND AVENUE
SUITE 230
MIAMI, FL 33175

New Mailing Address:

3143 NW 29 STREET
MIAMI, FL 33142

FEI Number: 65-1006420

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORREA, ZAPATA
2075 S.W. 122ND AVENUE
SUITE 230
MIAMI, FL 33175 US

Name and Address of New Registered Agent:

ALTAMIRANO, JOSE D
3143 NW 29 STREET
MIAMI, FL 33142 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: JOSE D ALTAMIRANO

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CORREA, MARIA Z
Address: 2075 S.W. 122ND AVENUE
City-St-Zip: MIAMI, FL 33175

Title: SD (X) Delete
Name: ALTAMIRANO, DAVID
Address: 2075 S.W. 122ND AVENUE
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: ALTAMIRANO, JOSE D
Address: 3143 NW 29 STREET
City-St-Zip: MIAMI, FL 33142

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: JOSE D ALTAMIRANO

PSTD

04/29/2004

Electronic Signature of Signing Officer or Director

Date