2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# P00000099042

Entity Name: AVENTURA WINDOWS COVER, INC.

Current Principal Place of Business:

6939 NE 3RD AVENUE
MIAMI, FL 33138

New Principal Place of Business:

Current Mailing Address:

6939 NE 3RD AVENUE
MIAMI, FL 33138

New Mailing Address:

FEI Number: 65-1049275 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MENDEZ, MANUEL
17890 NE 31ST COURT APT 3316
NORTH MIAMI, FL 33160 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: PSD ( ) Delete
Name: MENDEZ, MANUEL
Address: 17890 NE 31ST COURT APT 3316
City-St-Zip: NORTH MIAMI, FL 33160

Title: VTD ( ) Delete
Name: MENDEZ, NORMA
Address: 17890 NE 31ST COURT APT 3316
City-St-Zip: NORTH MIAMI, FL 33160

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 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: MANUEL MENDEZ P 04/30/2009

Electronic Signature of Signing Officer or Director Date