## **2002 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE: \_

DOCUMENT # P00000117676  1. Entity Name CERTIFIED WINDOWS & DOORS, INC.					Feb 10, 2002 8:00 am Secretary of State 02-10-2002 90044 050 ***158.75			
Principal Place 1401 E. BROV #206 FT. LAUDERD	vard blvd. Ale-Fi. 33301	Mailing Address  1401 E: BROWARD BLVD. #206 FT. LAUDERDALE FL 33301						
Principal P	SW 13 AVENUE	3. Mailing Address W.W. 41 TERLACE		200	I I <b>ns</b> iinda jih oolik ootki ookk adkii	OOTEN 11001 11011 10010 ENTI	19619 EHY JAÎL	
Suite, Apt.	<del> </del>	Suite, Apt. #, etc.		20	DO NOT WRITE IN THIS SPACE			
Pom DA	vo Beach, FC	City & State FORT LANDERDALE, FL		4.	FEI Number 65-1064530	— <del>— —</del>	oplied For ot Applicable	
3306	·Country	Zip 33319	Country 115	5.	Certificate of Status Desired	\$8.75 Add Fee Require		
	6. Name and Address of Current R			7.	Name and Address of New Reg	jistered Agent		
Name L. JAMES KELDERHOUSE								
HERMAN,	BRUCE	metricus.	Street A	ddress (P.O.	Box Number is Not Acceptable)	OUSE		
5921 N.W	. 41 TERRACE		Oli Got 7 to		. Box realition to real to coopiable,			
FT. LAUDERDALE FL 33319			5	921 N	21 N.W. 415 TERRACE			
			City	aer Li	AUDERDALE	FL Z	319	
8. The above	named entity submits this statement for t	he purpose of changing its re	edistered office or	registered a	agent, or both, in the State of Florid	da.		
SIGNATURE     Signature, typed or printed name of neistered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)    DATE   D								
Tax filing requirement and elects to do so After May 1, 2002			FEE IS \$150.00 Fee will be \$550.00 to Department of State					
11.	OFFICERS AND D	IRECTORS	12.	<u> </u>	ADDITIONS/CHANGES TO OFFICE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KELDERHOUSE, L. JAMES 5921 N.W. 41 TERRACE FT. LAUDERDALE FL 33319	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	KELDEI SGZI FT LA	RHOUSE, L.JAMES N.W. 41 TERRACE WOERDALE FL 33	319	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KELDERHOUSE, SUZANNE J 5921 N.W. 41 TERRACE FT. LAUDERDALE FL 33319	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	KELDE SYZ	RHOUSE, SUZANNE ) N.W. 41 TERRA AUDELDALE FL 3	.5 Phange See 3319	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		· <u>-</u>	☐ Change	☐ Addition	
					11.00	Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP		∐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
indicated of the cor	L  certify that the information supplied with the on this report or supplemental report is to poration or the receiver or trustee empower or on an attachment with an address, with the content of the receiver or on an attachment with an address, with the receiver or	rue and accurate and that my rered to execute this report as	signature shall h	ave the same	e legal effect as if made under oat	th; that I am an officer	or director	

GRAMES KELDELHOUSE - 22-02
ICER OR DIRECTOR
Date