

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000032474

FILED
Mar 23, 2009
Secretary of State

Entity Name: ACTION WINDOW & GLASS, INC.

Current Principal Place of Business:

1000 EAST ATLANTIC AVENUE
SUITE 205H
POMPANO BEACH, FL 33060

New Principal Place of Business:

5743 NE 17 TERR
5743 NE 17 TERR
FORT LAUDERDALE, FL 33334

Current Mailing Address:

1000 EAST ATLANTIC AVENUE
SUITE 205H
POMPANO BEACH, FL 33060

New Mailing Address:

5743 NE 17 TERR
5743 NE 17 TERR
FORT LAUDERDALE, FL 33334

FEI Number: 65-1087453

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANDSTROM, JOSEPH
5743 NE 17 TERR
FORT LAUDERDALE, FL 33334 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: PSTD () Delete
Name: SANDSTROM, JOSEPH S
Address: 1000 EAST ATLANTIC AVENUE SUITE 205H
City-St-Zip: POMPANO BEACH, FL 33060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: SANDSTROM, JOSEPH S
Address: 5743 NE 17 TERR
City-St-Zip: FORT LAUDERDALE, FL 33334

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: JOSEPH SANDSTROM

PRES

03/23/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date