

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000052146

1. Entity Name

Continental Window & Door of Florida, Inc.



FILED

03 JUN -5 PM 2:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4311 West Belmont Avenue

Suite, Apt. #, etc.

3. Mailing Address

4311 West Belmont Avenue

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Chicago, Illinois

City & State

Chicago, Illinois

4. FEI Number

65-1105057

Applied For

Not Applicable

Zip

60641

Country

USA

Zip

60641

Country

USA

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hayes Street

City

Tallahassee

FL

Zip Code
32301

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Nick Gutu

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

6/14/2003

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

President & Director
Nick Gutu
4311 West Belmont Avenue
Chicago, IL 60641

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

REINSTATEMENT

TITLE
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CITY-ST-ZIP

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IN THIS SPACE**

400020548034

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with another like employed.

SIGNATURE:

Nick Gutu

Nick Gutu

6-2-2003 (773) 794-1600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2E034B (12/02)



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : ~~118002~~ 4326744

AUTHORIZATION : *Patricia Pigute*

COST LIMIT : \$ 908.75

ORDER DATE : June 4, 2003

ORDER TIME : 11:47 AM

ORDER NO. : 118002-005

CUSTOMER NO: 4326744

CUSTOMER: David J. Jolivet, Esq
Jolivet & Templer, P.c.
Suite 1017
10 South Lasalle Street
Chicago, IL 60603

DOMESTIC FILINGS

NAME: CONTINENTAL WINDOW & DOOR
OF FLORIDA, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward, Ext. 1135

EXAMINER'S INITIALS _____

RECEIVED
03 JUN -5 PM 1:03
DIVISION OF CORPORATION