FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name: Jose's Windows AND Doors Inc

FILED

03 OCT 20 AM 8:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

REINSTATEMENT 07
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1017 Fortsmith Blvd Suite, Apt. #, etc.	1017 Fortsmith Blvd Suite, Apt. #, etc.
City & State: Deltona Florida	City & State: Deltona Florida
Zip: 32738 Country: USA	Zip: 32738 Country: USA

4. FEI Number: 01-0678027 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Jose Laureano Sr.

Street Address (P.O. Box Number is Not Acceptable): 1017 Fortsmith Blvd.

City: Deltona FL Zip Code: 32738

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: Jose Laureano 10/16/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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	VICE-President Fernando Rodriguez 3344 California ST Deltona Florida 32738	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President - Jose Laureano Sr 1017 Fortsmith Blvd Deltona, FL 32725	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
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CR2E034B (12/02)

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 all other like empowered.

SIGNATURE: Jose Laureano Jose Laureano 10/16/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

JP 10/22

10/16/03

To the Dept. of State
Division of Corporation.

Jose Window and Doors Inc.
Requesting Penalty Waiver for
Re-instatement, Did not Receive
notification of Requesting officers
of the Corp. most of the mail may have
been sent back. The pre-mailing address
was A P.O Box NO 6217. was Changed to
Psychial Address. 1017 Fortsmith Blvd.
Tried to inform everyone manuely or by
phone. Please except my apology for the
missed mail.

Jose Windows and Doors Inc.
1017 Fortsmith Blvd.
Deltona Florida 32728.
(386) 860-9175

Sincerely Jose Lamuno Sr.