

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000019985

FILED
Apr 19, 2005
Secretary of State

Entity Name: FDS ALUMINUM WINDOWS CORP.

Current Principal Place of Business:

5522 N.W. 39TH AVENUE
COCONUT CREEK, FL 33073

New Principal Place of Business:

Current Mailing Address:

5522 N.W. 39TH AVENUE
COCONUT CREEK, FL 33073

New Mailing Address:

FEI Number: 03-0413249

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THERIAULT, STEPHANE
5522 NW 39 TH AVENUE
COCONUT CREEK, FL 33073 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: D () Delete
Name: THERIAULT, STEPHANE
Address: 5522 N.W. 39TH AVENUE
City-St-Zip: COCONUT CREEK, FL 33073

Title: D () Delete
Name: SOULARD, MICHEL
Address: 5522 N.W. 39TH AVENUE
City-St-Zip: COCONUT CREEK, FL 33073

Title: D () Delete
Name: SOULARD, ROSAIRE
Address: 5522 N.W. 39TH AVENUE
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: THERIAULT, STEPHANE
Address: 5522 N.W. 39TH AVENUE
City-St-Zip: COCONUT CREEK, FL 33073

Title: SD (X) Change () Addition
Name: SOULARD, MICHEL
Address: 5522 N.W. 39TH AVENUE
City-St-Zip: COCONUT CREEK, FL 33073

Title: VPD (X) Change () Addition
Name: SOULARD, ROSAIRE
Address: 5522 N.W. 39TH AVENUE
City-St-Zip: COCONUT CREEK, FL 33073

I hereby certify that the information supplied with this filing does not qualify for the 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 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: STEPHANE THERIAULT

PD

04/19/2005

Electronic Signature of Signing Officer or Director

Date