


2007 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
 J. B. Blair, Jr. @ 08:00 AM
 Mar 19, 2007
 Secretary of State

DOCUMENT # P02000067515
 1. Entity Name
 ALWAYS COOL WINDOW TINTING, INC.



Principal Place of Business: 887 CARLYLE AVENUE, SE, PALM BAY, FL 32909
 Mailing Address: 887 CARLYLE AVENUE, SE, PALM BAY, FL 32909

DO NOT WRITE IN THIS SPACE



01032007 No Chg-P CR2E034 (11/05)
 4. FEI Number: 04-3683938 Applied For: Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 SANCHEZ, WILLIAM
 887 CARLYLE AVENUE, SE
 PALM BAY, FL 32909

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

000000673119
 03/29/07-80017-004 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	SANCHEZ, WILLIAM
STREET ADDRESS	887 CARLYLE AVENUE, SE
CITY - ST - ZIP	PALM BAY, FL 32909
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *William E. Sanchez* **William E. Sanchez** 3/19/07 321-729-7577
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #