


2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

09 APR -1 PM 2:29

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



01062009 No Chg-P CR2E034 (11/08)

4. FEI Number 04-3683938	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2009 Fee will be \$550.00**

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	D SANCHEZ, WILLIAM 887 CARLYLE AVENUE, SE PALM BAY, FL 32909
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04/01/09--01038--030 **150.00

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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 3/20/09 (321)728-7577
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #