

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P03000031198

**FILED**  
**Nov 29, 2012**  
**Secretary of State**

**Entity Name:** TROPICAL WINDOWS MANUFACTURING INC.

**Current Principal Place of Business:**

661 W. 27 STREET  
HIALEAH, FL 33010

**New Principal Place of Business:**

**Current Mailing Address:**

661 W. 27 STREET  
HIALEAH, FL 33010

**New Mailing Address:**

**FEI Number:** 43-2024666

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CANO, MIGUEL  
7925 SW 79 TERRACE  
MIAMI, FL 33143 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:** MIGUEL CANO

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** CANO, MIGUEL  
**Address:** 7925 SW 79 TERRACE  
**City-St-Zip:** MIAMI, FL 33143

**Title:** VP  
**Name:** CANO, CATHERINE  
**Address:** 7925 SW 79 TERR  
**City-St-Zip:** MIAMI, FL 33143

I hereby 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 all other like empowered.

**SIGNATURE:** MIGUEL CANO

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

11/29/2012

\_\_\_\_\_  
Date