

2006 FOR PROFIT CORPORATION ANNUAL REPORT

ADDED
06-13-2006 90001 048 ***150.00
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06 JUN 22 PM 4:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JS

DOCUMENT # P03000128658 1. Entity Name ROY WINDOW AND SCREEN REPAIR INC.					
Principal Place of Business 3450 NW 41 STREET FT LAUDERDALE, FL 33309			Mailing Address 3450 NW 41 STREET FT LAUDERDALE, FL 33309		
Principal Place of Business 3450 NW 41 St Suite, Apt. #, etc. House			3. Mailing Address 3450 NW 41 St Suite, Apt. #, etc. House		
City & State Lauder Lake Zip 33309		City & State Lauder Lake Fla Zip 33309		Country AMERICA	
4. FEI Number 32-0134067				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GAYLE, ROYDEN K 3450 NW 41 STREET FT LAUDERDALE, FL 33309			7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) City State FL		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering)</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2008		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GAYLE, ROYDEN K 3450 NW 41 STREET FT LAUDERDALE, FL 33309		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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 my address, with all other like empowered.					
SIGNATURE: <i>Royden K Gayle</i> Roy Window and Screen Repair <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date</small> _____ <small>Daytime Phone #</small> _____					