## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000153992

**Entity Name: MARROQUIN WINDOW TREATMENTS** 

**FILED** Feb 25, 2010 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3907 QUARTZ AVE 2750 CHADDSFORD CIRCLE ORLANDO, FL 32826

102

OVIEDO, FL 32765

**Current Mailing Address: New Mailing Address:** 

3907 QUARTZ AVE 2750 CHADDSFORD CIRCLE ORLANDO, FL 32826

OVIEDO, FL 32765

FEI Number: 52-2437026 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MIGUEL A, MARROQUIN MIGUEL A, MARROQUIN 3907 QUARTZ AV. 2750 CHADDSFORD CIRCLE ORLANDO, FL 32826 US 102

OVIEDO, FL 32765 US

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: 02/25/2010

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

MARROQUIN, MIGUEL A Name: 2750 CHADDSFORD CIRCLE102 Address:

City-St-Zip: OVIEDO, FL 32765

Title:

Name: MARROQUIN MIGUEL A

2750 CHADDSFORD CIRCLE. 102 Address:

OVIEDO, FL 32765 City-St-Zip:

Title: SEC

MARROQUIN, MIGUEL A Name: 2750 CHADDSFORD CIRCLE 102 Address:

City-St-Zip: OVIEDO, FL 32765

Title: **TRES** 

MARROQUIN, MIGUEL A Name:

Address: 2750 CHADDSFORD CIRCLE 102

City-St-Zip: OVIEDO, FL 32765

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.

Ρ SIGNATURE: MIGUEL A. MARROQUIN 02/25/2010