2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000041534

1001 S.W. BENSCHOP AVE

PORT SAINT LUCIE, FL 34953

Address: City-St-Zip:

Entity Name: BELLMAR WINDOW & DOOR INSTALLATION INC.

FILED Mar 16, 2009 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:			
1001 SW BENSCHOP AVE PORT SAINT LUCIE, FL 34953				5018 SW CHEROKEE STREET PALM CITY, FL 34990			
Current Mailing Address:				New Mailing Address:			
1001 SW BENSCHOP AVE PORT SAINT LUCIE, FL 34953				5018 SW CHEROKEE STREET PALM CITY, FL 34990			
FEI Number	: 20-0847256	FEI Number Applied For()	FEI Num	ber Not Appl	icable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
MARCIAL, NESTOR 1001 SW BENSCHOP AVE PORT SAINT LUCIE, FL 34953 US				MARCIAL, NESTOR 5018 SW CHEROKEE STREET PALM CITY, FL 34990 US			
	named entity e of Florida.	submits this statement for th	e purpose of	changing i	ts registered o	ffice or registered agent, or	both,
SIGNATURE:				03/16/2009			
	Electro	nic Signature of Registered /	Agent			Date	
Election Car	mpaign Financii	ng Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	MARCIAL, AN			Title: Name: Address: City-St-Zip:	MARCIAL, ANN	ROKEE STREET	
Title: Name: Address: City-St-Zip:	MARCIAL, NE 1001 S.W. BE) Delete STOR L NSCHOP AVE LUCIE, FL 34953		Title: Name: Address: City-St-Zip:	MARCIAL, NES 5018 SW CHER	ROKEE STREET	
Title: Name:	T () MCQUEEN, N	K) Delete ORMAN		Title: Name:	()	Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: ANNETTE M. MARCIAL S 03/16/2009