

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000079887

Entity Name: FACTORY WINDOW DESIGN, INC.

FILED
Apr 18, 2007
Secretary of State

Current Principal Place of Business:

7153 SOUTHERN BLVD
WEST PALM BEACH, FL 33413

New Principal Place of Business:

16877 EAST COLONIAL DRIVE
120
ORLANDO, FL 32820

Current Mailing Address:

7153 SOUTHERN BLVD
WEST PALM BEACH, FL 33413

New Mailing Address:

16877 EAST COLONIAL DRIVE
120
ORLANDO, FL 32820

FEI Number: 32-0153585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LACOSTTE, ROSA
8983 OKEECHOBEE BLVD STE 120
WEST PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

LACOSTTE, LUIS
16877 EAST COLONIAL DRIVE
120
ORLANDO, FL 32820 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: LUIS LACOSTTE

04/18/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LACOSTTE, ROSA
Address: 8983 OKEECHOBEE BLVD STE 120
City-St-Zip: WEST PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LACOSTTE, LUIS
Address: 16877 EAST COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32820

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: LUIS LACOSTTE

D

04/18/2007

Electronic Signature of Signing Officer or Director

Date