2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 04, 2006 8:00 am Secretary of State

	71111011				3	BULL	tary or	Biai
DOCUMENT # P05000114470 1. Entity Name MSM WINDOWS, INC.							006 90277 003	
Principal Place	a of Business	Mailing Address			Ì			
778 WESTLINE AVENUE DELTONA, FL 32725		778 WESTLINE AVENUE DELTONA, FL 32725		66014423				
						DOBAR DA JURKI	IL MODEL DIEM CHAIR PHAN HOUR	CONTRACTOR
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, stc.		Suite, Apt. #, etc.		04092006	Chg-P	CR2E034 (11/05	<u> </u>	
City & State	9	City & State	City & State		4. FEI Number	0-332	ハクスベクー	Applied For Not Applicable
Zip	Country	Zip	Coun	iry	<u> </u>	of Status Desired	□ \$8.75 A Fee Requi	
<u> </u>	6. Name and Address of Currer	it Registered Agent		Name	7. Name and	Address of New R	egistered Agent	
MANLEY,	MARK S			Name				
778 WEST	LINE AVENUE , FL 32725			Street Address (P.O. Box Number is Not Acceptable)				
	· ,	-						
	<i>#</i> ,			City			FL Zip C	ode
	named entity submits this statement ions of registered agent.	for the purpose of changing its	register	ed attice or registe	red agent, or bo	th, in the State of Flo	rida. I am familiar wi	h, and accept
SIGNATURE.	Signature, typed or princed number of registered ago	rit and title if applicable. (NO)	E. Registare	d Agent signature require	d when rainstating)		OATE	
	E NOWIII FEE IS \$150.00 By 1, 2006 Fee will be \$550	9. Election Campa Trust Fund Con			.00 May Be ded to Fees			PG- 7
10.	OFFICERS AN	O DIRECTORS	11.		ADDITIONS/	CHANGES TO OFF	CERS AND DIRECTO	RS IN 11
TITLE	P MANUEY MARK C	☐ Delete	TITLE	II.			☐ Change	Addition
NAME STREET ADORESS	MANLEY, MARK S 778 WESTLINE AVENUE		NAM STRE	E ADDRESS				:
CITY-SI-ZIP	DELTONA, FL 32725			-ST-ZIP				
LUFE	VP	☐ Delete	DTL	E			☐ Change	Addition
NAME	PROCTOR, DEREK S		HAM.					
STREET ADDRESS	749 N THIRD AVE. DELTONA, FL 32725			ET ADORESS -S1-ZIP				
1016	DEE10104, FE 32/23	☐ Geiata	tric				Chang	- Addition
NAME	,		NAM					
STREET ADDRESS				ET ADDRESS				
CHY-ST-ZIP				-\$1 · 21P			(T) (N)	
NAME		☐ Delete	TITLE				Change	Addition
STREET ADDRESS				ET ADDRESS				
CIT-ST-ZP			CITY	-ST-ZIP				
INLE		☐ Delete	1111	1			Change	Addition
STREET ADDRESS	ļ		NAM STRE	ET ADORESS				
C111-51-ZEF			CITY	-SI-ZIP				
mu		☐ Detesa	III	<u> </u>	• •		☐ Change	Addition
NUME			HAM					
STREET ADDRESS				ET ADDRESS -S1-ZIF				
	Certify that the information supplied w	ith this filing does not qualify f	or the exi	emptions containe	d in Chapter 119	, Florida Statutes, I	further certify that the	information
I indicator	t on this report or cupolamanial report	Lie to a and annurals and that	OW FIRMS	the about though the	name level effec	t as it made under a	armi ibas I see se elfic	Ar or director

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 eath; 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 an address, with all other like empowered.

	SIGNATURE:	Ma I Margar	40-01-12	
SIGNATURE AND TYPED OR PRINTED NAME OF SERMING OFFICER Date Date Days Proce #		SIGNATURE AND TYPED ON PRINTED HASE OF SKIMMED OF SERVICE ON CHECTOR	Case	Daysine Phone #