2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000157466

Address:

City-St-Zip:

Entity Name: LL WINDOWS TREATMENT SERVICES, INC

FILED Apr 15, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
2267 IDA W 31B	/AY			2267 IDA WAY 31B			
	M BEACH,	33415		WEST PALM BEAG	CH, FL 334	15	
Current Mailing Address:				New Mailing Address:			
2267 IDA W 31B	/AY			2267 IDA WAY 31B			
WEST PALM BEACH, 33415				WEST PALM BEACH, FL 33415			
FEI Number:	20-8124927	FEI Number Applied For ()	FEI Nui	mber Not Applicable ()	Certif	ficate of Status Desired	()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
	/AY .M BEACH, F named entity	FL 33415 US submits this statement for th	e purpose d	of changing its registe	ered office c	or registered agent, o	or both,
SIGNATUR							
	Electro	onic Signature of Registered <i>i</i>	Agent			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	LEYVA, LUIS 2267 IDA WA) Delete Y 31B BEACH, FL 33415		Title: Name: Address: City-St-Zip:	()Chang	e () Addition	
Title:	() Delete		Title: VP		e (X) Addition	

Address:

2267 IDA WAY 31B City-St-Zip: WEST PALM BEACH, FL 33415

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 LEYVA Ρ 04/15/2007