

2008 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
May 08, 2008 8:00 am
Secretary of State

03-31-2008 90022 011 ***150.00

DOCUMENT # P07000034440					
1. Entity Name SOUTH FLORIDA WINDOWS, INC.					
Principal Place of Business 3878 PROSPECT AVE., SUITE 7 RIVIERA BCH, FL 33404			Mailing Address 3878 PROSPECT AVE., SUITE 7 RIVIERA BCH, FL 33404		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		01272008 Chg-P CR2E034 (12/06)	
City & State		City & State		4. Fil Number 80-0138231	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KARNBACH, MICHAEL NO. 202 2ND CT. PALM BCH GARDENS, FL 33410				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD KARNBACH, MICHAEL NO. 202 2ND CT. PALM BCH GARDENS, FL 33410	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	V KARNBACH, GARY 3878 PROSPECT AVE, STE 7 RIVIERA BEACH, FL 33404	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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 supplementary report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment to this address, with all other like empowered.					
SIGNATURE: <i>Michael Karnbach</i> <i>Michael Karnbach</i> 2/16/08 561-307-0472					