2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)



FILED Jan 17, 2003 8:00 am

1. Entity Name WINDOWS OF THE WORLD II, INC.					01-17-2003 90130 011 **	
DCOTA BLDG # A123/A350 DCOTA I DANIA BEACH FL 33004 DANIA B		DANIA BEACH FL 33004	355 GRIFFIN ROAD. COTA BLDG # A-123/A350 ANIA BEACH FL 33004			1181 81781 HAN 1881 1881
1855	1855 Griffin Road 1855 Griff		in Road)	
DCOTA Bldg. A-350 DCOTA Blic				☐ CHECK HERE IF MAKING CHA	NGES	
Dania Beach, FL Dania B		Dania Bec	each, FL		4. FEI Number 65-0642051	Applied For
33°		33004	Country		5. Certificate of Status Desired \$8.7	Not Applicable 75 Additional
	6. Name and Address of Current	Registered Agent			7. Name and Address of New Registered Agent	Required
PADRON	I, BLANCA		Nam	B19	nca Padron	
1855 GRIFFIN RD.			Street Address (P.O. Box Number is Not Acceptable)			
SUITE AJ23			18	556	riffin Pro 1 Death A	1- 10 350
DANIA FL 33004			City			
8. The above named entry 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						
SIGNATURE Laure Harren						
Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00						
Make Chec	k Payable to Florida Department of	1				\$5.00 May Be Added to Fees
TITLE	OFFICERS AND I		11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECT	CTORS IN 11
NAME	NAJMAN, SONIA	Delete	TITLE NAME		nca Padron	
STREET ADDRESS 1855 GRIFFIN RD DCOTA BLDG # A-123/A-350 CITY-ST-ZIP DANIA BEACH FL 33004		STREET ADDRESS 1855		Griffin Road DCOTA Bldg	, A-350 S	
TITLE	p	Delete	CITY-ST-ZIP	Dan	19 Beach, FL 33004	
NAME STREET ADDRESS	PADRON, BLANCA	• •	TITLE NAME	Secr	etary Cha	ange 🗆 Addition 🗟
CITY-ST-ZIP	1855 GRIFFIN RD DCOTA BLDG # DANIA BEACH FL 33004	A-123/A-350	STREET ADDRESS CITY-ST-ZIP	1855	Griffin Road DOOTAB	ldg. A-350
TITLE		☐ Delete	TITLE	Dan	19 Beach, FL 33004	
NAME Street address			NAME		Cha	rige Addition
CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP			
TITLE NAME	<u> </u>	☐ Delete	TITLE		☐ Char	200
STREET ADDRESS			NAME CIRET (CRAPTOR]	C1 Old	nge 🗌 Addition
CITY-ST-ZIP	<u> </u>		STREET ADDRESS CITY-ST-ZIP			}
TITLE NAME		☐ Delete	TITLE		Chan	ge 🔲 Addition
STREET ADDRESS	,		NAME STREET ADDRESS			Audition
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE NAME		☐ Delete	TITLE		Chan	ge Addition
STREET ADDRESS			NAME STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			ĺ

12. I hereby certify that the information solplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplied 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 changed, or on an attachment with a paddress, with all other like empowered.

SIGNATURE:

ORE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR