

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jul 16 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000053784 (9)

1. Corporation Name

WINDY TURBINES, INC.

Principal Place of Business

20119 SW 124 COURT
MIAMI FL 33177

Mailing Address

20119 SW 124 COURT
MIAMI FL 33177



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/18/1997

4. FEI Number

65-0761997

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

2. Principal Place of Business

21 10755 S.W. 190th St.

Suite, Apt. #, etc.

22 #79

City & State

23 MIAMI FL

Zip

24 33157

Country

25 USA

2a. Mailing Address

26 10755 S.W. 190th St.

Suite, Apt. #, etc.

27 #79

City & State

28 MIAMI FL

Zip

29 33157

Country

30 USA

9. Name and Address of Current Registered Agent

BEAULIEU, ELIA
20119 SW 124 COURT
MIAMI FL 33177

10. Name and Address of New Registered Agent

81 Name

BEAULIEU ELIA

82 Street Address (P.O. Box Number is Not Acceptable)

18821 BELMONT DR

83

84 City

MIAMI

FL

85 Zip Code

33157

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Elia M. Beaulieu

02/21/98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D BEAULIEU, KEITH
STREET ADDRESS 20119 SW 124 COURT
CITY-ST-ZIP MIAMI FL 33177

TITLE ☐ DELETE

NAME D BEAULIEU, ELIA
STREET ADDRESS 20119 SW 124 COURT
CITY-ST-ZIP MIAMI FL 33177

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME D Beaulieu Keith
1.3 STREET ADDRESS 18821 BELMONT DR.
1.4 CITY-ST-ZIP MIAMI FL 33157

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME D BEAULIEU ELIA
2.3 STREET ADDRESS 18821 Belmont DR.
2.4 CITY-ST-ZIP MIAMI FL 33157

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

Elia Beaulieu

02/21/98

305-359-3516

CP2E034 (10/97)