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PROFIT CORPORATION **ANNUAL REPORT**

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P97000100141**1. Corporation Name

GOLDEN WINDOWS INC.

FILED Jan 28, 1999 8:00am **Secretary of State**

01-28-1999 90061 027 ***150.00



Principal Place of Business	Mailing Address	•						
5745 SW 97TH ST. 5745 SW 97TH ST. MIAMI FL 33156 MIAMI FL 33156			DO NOT	WRITE IN THIS	SDACE			
·						SFACE		l
		÷		3. Date Incorporated or Qual 11/21/1997	iled			
2. Principal Place of Business	2a. Mailing Address		*	4. FEI Number		A	pplied For	1
21	26			65-0800213			ot Applicable	\$4.00 C
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desire	ed , 🔲	•	Additional equired	<u> </u>
City & State	City & State			Election Campaign Finance Trust Fund Contribution	sing 🗆		May Be to Fees	
Zip Country	Zip	Coun	try	8. This corporation owes the	current year Int	angible		İ
25	29	30		Personal Property Tax.		Yes	XNo]
9. Name and Address of Current				10. Name and Address of N	ew Registered	Agent	<u></u>	1
A STATE OF THE STA	TULLINI		81 Name					
LUE, PATRICIA M. 5745 SW 97TH ST.	,		82 Street Add	ress (P.O. Box Number is Not Ac	ceptable)	** ** ** *1 ***	- 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5	
MIAMI FL 33156			B3	\$1.50 p. 10 f. 10		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		-	84 City		FI	85 Zip	Code	1
area for byth or	5765 5 5 5 5				FL	chonging it	e registered	-
11. Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation	f Florida. Such change was a	authorized	ov tne corporati	oration submits this statement to on's board of directors. I hereby a	ccept the appoi	ntment as r	egistered]
agent, i am familiar with, and accept the obligation	ons of, Section 607.0505, Fit	onda Statu	tes.					Ì
SIGNATURE	,	onda Statu	ies.				· · · · ·	
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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, with all other like empowered.