

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 24, 2000 08:00 AM**
Secretary of State**DOCUMENT # P99000003751****1. Entity Name**

CLEAR CHOICE WINDOWS & DOORS, INC.

Principal Place of Business

2095 W. 76TH STREET

HIALEAH
33016

FL

Mailing Address

2095 W. 76TH STREET

HIALEAH
33016

FL

2. Principal Place of Business

7440 SW 50TH TERRACE

3. Mailing Address

14301 SW 153RD AVENUE

Suite, Apt. #, etc.
UNIT 102A

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
MIAMI

FL

City & State
MIAMI

FL

4. FEI Number

65-1000916

Applied For

Not Applicable

Zip
33155

Country

Zip
33196

Country

5. Certificate of Status Desired**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent**SCAVUZZO ROBERT
2095 W. 76TH STREETHIALEAH
33016

FL

7. Name and Address of New Registered Agent

Name

QUINTANA GERMAN E

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

14301 SW 153RD AVENUE

City
MIAMI

FL

Zip Code
33196**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.**SIGNATURE **GERMAN E. QUINTANA**

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

(NOTE: Registered Agent signature required when reinstating)

04/24/2000

DATE

**9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.**
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution.** ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE	PD	<input type="checkbox"/> Delete
NAME	SCAVUZZO ROBERT	
STREET ADDRESS	2095 W. 76TH STREET	
CITY-ST-ZIP	HIALEAH FL 33016	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	QUINTANA GERMAN E	
STREET ADDRESS	14301 SW 153RD AVE	
CITY-ST-ZIP	MIAMI FL 33196	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: German E. Quintana

PD: 04/24/2000