

2013 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

13 MAR 11 AM 9:06

CLERK OF STATE
ALLAHASSEE FLORIDA

DOCUMENT # P99000007541					
1. Entity Name ADVANCED WINDOW TINTING, INC.					
Principal Place of Business 9506 HOOD ROAD JACKSONVILLE, FL 32257			Mailing Address 9506 HOOD ROAD JACKSONVILLE, FL 32257		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		10152013 Chg-P CR2E034 (12/11)	
4. FEI Number 59-3551433				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
TILLMAN, RICHARD 9506 HOOD ROAD JACKSONVILLE, FL 32257			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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$550.00 Due by September 27, 2013		9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE P	NAME TILLMAN, RICHARD		☐ Delete		
STREET ADDRESS 9506 HOOD RD	JACKSONVILLE, FL 32257		TITLE 500252998735		
CITY- ST- ZIP	JACKSONVILLE, FL 32257		10/18/13--01002--006 **150.00		
TITLE VP	NAME TILLMAN, SUSAN R		☐ Delete		
STREET ADDRESS 9506 HOOD RD	JACKSONVILLE, FL 32257		☐ Change ☐ Addition		
CITY- ST- ZIP	JACKSONVILLE, FL 32257		TITLE NAME STREET ADDRESS CITY- ST- ZIP		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		☐ 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Raye Tillman</u>			DATE: <u>10/15/13</u> E-MAIL ADDRESS: <u>advancedtint@gmail.com</u>		

10/10/13

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Transactions

Transaction Id	Document Id	Filing Fee	Filing Status	Filing Date
4018229f-c117-4fcc-8a4f-6fea5b13215f	P99000007541	0	2	1/8/2011 12:00:00 AM
4dd7efd8-4d5d-4e32-b3b8-3a2ac1615c87	P99000007541	0	2	4/16/2012 12:00:00 AM
b4442b23-b5f3-4834-afcb-d3df84b49251	P99000007541	0	2	3/22/2010 12:00:00 AM
p99000007541-ebdee39e-8af3-4959-a17f-435df824ee5d	P99000007541	150	0	3/11/2013 3:08:43 PM

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