

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2002 8:00 am
Secretary of State

05-16-2002 90009 028 ***150.00

DOCUMENT # P99000010256

1. Entity Name

DYNAMIC WINDOW SHUTTERS, INC.

Principal Place of Business

**2450 SOUTHWEST 137TH AVE.
 SUITE 221
 MIAMI FL 33175**

Mailing Address

**2450 SOUTHWEST 137TH AVE.
 SUITE 221
 MIAMI FL 33175**

2. Principal Place of Business

**9192 Coral Way
 Suite 201**

3. Mailing Address

**9192 Coral Way
 Suite 201**

City & State

Miami, Florida

City & State

Miami, Florida

Zip **33165** Country **U.S.**

Zip **33165** Country **U.S.**



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0892045**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**ROSADO, LEOCAIDA E
 2460 SOUTHWEST 137TH AVE.
 SUITE 250
 MIAMI FL 33175**

7. Name and Address of New Registered Agent

Name **Leonadia E. Rosado**
 Street Address (P.O. Box Number is Not Acceptable)
12632 SW 221 Street
Miami, FL 33170
 City **FL** Zip Code **33140**

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

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

(NOTE: Registered Agent signature required when reinstating)

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, 2002 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** ☐ Delete
 NAME **ROSADO, RAFAEL**
 STREET ADDRESS **2460 SOUTHWEST 137TH AVE. SUITE 250**
 CITY-ST-ZIP **MIAMI FL 33175**

TITLE **VPD** ☐ Delete
 NAME **ROSADO, LECADIA E**
 STREET ADDRESS **2460 SOUTHWEST 137TH AVE. SUITE 250**
 CITY-ST-ZIP **MIAMI FL 33175**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Change ☐ Addition
 NAME **Rosado, Rafael**
 STREET ADDRESS **13800 S.W. 8th Street, Box 373**
 CITY-ST-ZIP **Miami, FL 33184**

TITLE **VPD** ☒ Change ☐ Addition
 NAME **Rosado, Leonadia E.**
 STREET ADDRESS **13800 S.W. 8th Street, Box 373**
 CITY-ST-ZIP **Miami, FL 33184**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ 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 line empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/02
 Date

Daytime Phone #

CR2E034 (9/01)