

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000021682

1. Entity Name

MARINE WINDOWS U.S.A. INC.

FILED
Jan 31, 2000 8:00 am
Secretary of State

01-31-2000 90107 030 ***150.00

Principal Place of Business	Mailing Address
8725 N.W. 117 ST. BAY #3 HIALEAH GARDENS FL 33016	8725 N.W. 117 ST. BAY #3 HIALEAH GARDENS FL 33018-1975

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
SERRANO, CARLOS 8725 N.W. 117 ST. BAY #3 HIALEAH GARDENS FL 33016

4. FEI Number	Applied For
65-0915059	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
7. Name and Address of New Registered Agent	
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.

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, 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
NAME	SERRANO, CARLOS M
STREET ADDRESS	7214 W. 30 LANE
CITY-ST-ZIP	HIALEAH FL 33018
TITLE	VPD
NAME	PINO, JOSE L
STREET ADDRESS	1085 W. 32 ST.
CITY-ST-ZIP	HIALEAH FL 33010
TITLE	TD
NAME	MALAVE, ANGEL
STREET ADDRESS	4911 N.W. 192 ST.
CITY-ST-ZIP	MIAMI FL 33051
TITLE	SD
NAME	SERRANO, LUISA
STREET ADDRESS	7214 W. 30 LANE
CITY-ST-ZIP	HIALEAH FL 33018
TITLE	VSD
NAME	SERRANO, FULGENCIO R
STREET ADDRESS	7214 W. 30 LANE
CITY-ST-ZIP	HIALEAH FL 33018
TITLE	VTD
NAME	PINO, LEONOR
STREET ADDRESS	1085 W. 32 ST.
CITY-ST-ZIP	HIALEAH FL 33010

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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	
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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/25/00

305-557-3443