


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2005 08:00 AM
Secretary of State

DOCUMENT # P99000021682	
1. Entity Name MARINE WINDOWS U.S.A. INC.	

Principal Place of Business 8725 N.W. 117 ST. BAY #3 HIALEAH GARDENS, FL 33016	Mailing Address 8725 N.W. 117 ST. BAY #3 HIALEAH GARDENS, FL 33016
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03112005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0915059	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SERRANO, CARLOS 8725 N.W. 117 ST. BAY #3 HIALEAH GARDENS, FL 33016	DO NOT WRITE IN THIS SPACE
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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)

DATE

03/19/05-80033-005 150.00

FILE NOW!!! FEE IS \$450.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

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

DO NOT WRITE IN THIS SPACE

12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Carlos M Serrano = CARLOS M Serrano = 3-15-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #