## **2008 FOR PROFIT CORPORATION**

## **ANNUAL REPORT**

## FILED Jun 04, 2008 8:00 am Secretary of State

DOCUMENT # V21075  1. Entity Name EXPRESSIVE WINDOW FASHIONS INC.							8 90001 007 ***	150.00
Principal Place	1 D	NA-16 Add			344	V 1 4 4 V		
1145 CRESC	ENT LAKE DR N URG, FL 33701 US	1145 CRESCENT LAKE D	Mailing Address  1145 CRESCENT LAKE DRIVE N. ST PETERSBURG, FL 33701 US				81H 87811 81811 87811 87811 8	<b></b>
Principal Place of Business - No P.O. Box #     3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.		05152008	Chg-P	CR2E034 (12/0	6)	
City & State		City & State		4. FEI Number 59-312			Applied For Not Applicable	
Zip	Country	Zip	Country	Country		of Status Desired	□ \$8.75 Fee Req	Additional uired
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
OII DEDT	BDUCE		Nam	Name				
GILBERT, BRUCE 1145 CRESCENT LAKE DRIVE N ST PETERSBURG, FL 33701				Street Address (P.O. Box Number is Not Acceptable)				
			City					
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 of charged name of registered agent and title of applicable. (NOTE: Registered Agent signature required when reinstating)  DATE								
FILE NOW!!! FEE IS \$150.00  Due by September 12, 2008  9. Election Campaign Finance Trust Fund Contribution.					.00 May Be ed to Fees		e with s. 607.193(2)( d not receive the pri	
10. OFFICERS AND DIRECTORS 11.			11,		ADDITIONS/	CHANGES TO OF	FICERS AND DIRECT	ORS IN 11
TITLE NAME			TITLE NAME				☐ Chang	e 🔲 Addition
STREET ADDRESS CITY-ST-ZIP	1145 CRESCENT LAKE DRIVE N STR		STREET ADDRE	ss				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRE	ss			☐ Chang	e Addition
12. I hereby o	certify that the information supplied with	this filing does not qualify for	the exemption	s contained	in Chapter 119	, Florida Statutes	I further certify that the	e information

riginated 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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Forms

Listed below is the most recent information reported for the entity. Please review and click the 'Continue the bottom to generate the annual report form.

\*\* The document number, business name and file date cannot be changed on the report. \*\*

**Document Number** 

V21075

Business Entity Name EXPRESSIVE WINDOW FASHIONS INC.

**Original File Date** 

03/16/1992

**FEI Number** 

59-3120909

Principal Address

1145 CRESCENT LAKE DR N ST PETERSBURG, FL 33701 US

1145 CRESCENT LAKE DRIVE N.

**Mailing Address** 

ST PETERSBURG, FL 33701 US

**BRUCE GILBERT** 

Registered Agent 1145 CRESCENT LAKE DRIVE N

ST PETERSBURG, FL 33701 US

## Officer/Director Name And Address

**BRUCE GILBERT** 1145 CRESCENT LAKE DRIVE N ST PETERSBURG, FL 33701 US

If all of the above information is correct and you do not wish to make any changes, please

> select: No Changes

If you need to make changes to the above information, please select:

**Make Changes**