

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000275009

**Entity Name:** FULL WINDOW CONCEPTS LLC

**Current Principal Place of Business:**

6501 SEDGEWYCK CIR W  
DAVIE, FL 33331

**Current Mailing Address:**

6501 SEDGEWICK CIRCLE W  
DAVIE, FL 33331 US

**FEI Number:** 87-1198464

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

JOSE, OLIVEROS  
6501 SEDGEWYCK CIR W  
DAVIE, FL 33331 US

*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:** JOSE OLIVEROS

01/03/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name OLIVEROS, JOSE  
Address 6501 SEDGEWYCK CIRCLE W  
City-State-Zip: DAVIE FL 33331

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOSE OLIVEROS

AMBR

01/03/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date