

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000023022

FILED  
Mar 28, 2008  
Secretary of State

Entity Name: COAST TO COAST SHUTTER CORP

**Current Principal Place of Business:**

9115 NW 113 ST.  
HIALEAH GARDENS, FL 33018

**New Principal Place of Business:**

**Current Mailing Address:**

9115 NW 113 ST.  
HIALEAH GARDENS, FL 33018

**New Mailing Address:**

FEI Number: 20-4327573      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ROCHA, KELLY  
9115 NW 113 ST.  
HIALEAH GARDENS, FL 33018      US

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

VACHON, MICHAEL  
815 N HOMESTEAD BLVD  
341  
HOMESTEAD, FL 33030 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: MICHAEL VACHON      03/28/2008  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: ROCHA, KELLY P  
Address: 9115 NW 113 ST.  
City-St-Zip: HIALEAH GARDENS, FL 33018

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P      (X) Change ( ) Addition  
Name: DIQUE, LUCELLY P  
Address: 9115 NW 113 ST.  
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: VP      ( ) Change (X) Addition  
Name: ROCHA, KELLY VP  
Address: 9115 NW 113 ST.  
City-St-Zip: HIALEAH GARDENS, FL 33018

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUCELLY DIQUE      P      03/28/2008  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date