

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 14, 2003 8:00 am**  
**Secretary of State**

04-14-2003 90035 032 \*\*\*150.00

**DOCUMENT # P93000031995**

1. Entity Name

**TROPICAL STORM SHUTTERS, INC.**



Principal Place of Business

**4300 SW 73RD AVE  
103A  
MIAMI FL 33155  
US**

Mailing Address

**P.O. BOX 651925  
MIAMI FL 33265-1925  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**65-0407412**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**VENTURA, ENRIQUE J ESQ  
999 PONCE DE LEON BLVD  
STE 1110  
CORAL GABLES FL 33134**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Enrique J Ventura*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
NAME **PVP**  
STREET ADDRESS **RAMOS, ESTEBAN O**  
CITY-ST-ZIP **13410 S.W. 4 TERRACE**  
**MIAMI FL 33184**

TITLE ☐ Change ☐ Addition  
NAME **PVP.**  
STREET ADDRESS **RAMOS, ESTEBAN O.**  
CITY-ST-ZIP **13410 SW 4 TERR. Same.**  
**Miami - FL 33184**

TITLE ☐ Delete  
NAME **S**  
STREET ADDRESS **BRITO, ALEX I**  
CITY-ST-ZIP **1205 N.W. 10TH STREET**  
**DANIA FL**

TITLE ☐ Change ☐ Addition  
NAME **RAMOS ESTEBAN VP.**  
STREET ADDRESS **13410 SW 4 TERR.**  
CITY-ST-ZIP **Miami - FL 33184**

TITLE ☐ Delete  
NAME **V**  
STREET ADDRESS **RAMOS, ESTEBAN**  
CITY-ST-ZIP **13410 SW 4 TERRACE**  
**MIAMI FL 33184**

TITLE ☐ Change ☐ Addition  
NAME **BRITO ALEX I. Secr.**  
STREET ADDRESS **1205 N.W. 10TH ST.**  
CITY-ST-ZIP **DANIA FL.**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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, without other like empowered.

SIGNATURE:

*Enrique J Ventura*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*04/06/03*

*305-364-7470*

CR2E034 (10/02)