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Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90249 046 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P98000075815

1. Corporation Name
SHUTTERHAUS INDUSTRIES, INC.



Principal Place of Business
 8666 SEMINOLE BOULEVARD
 SEMINOLE FL 33772

Mailing Address
 8666 SEMINOLE BOULEVARD
 SEMINOLE FL 33772

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/31/1998

4. FEI Number
59-3530946

Applied For
 Not Applicable

2. Principal Place of Business
2501 Anvil Street

2a. Mailing Address
2501 Anvil Street

5. Certificate of Status Desired **\$8.75** Additional Fee Required

23. City & State
St. Petersburg, FL

28. City & State
St. Petersburg FL

6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

24. Zip **33710** 25. Country **USA**

29. Zip **33710** 30. Country **USA**

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BARTHOLMEY, SCOTT D.
8666 SEMINOLE BOULEVARD
SEMINOLE FL 33772

81
82
83
84

SAME

FL 85

11. Pursuant to the provisions of Sections 607 office or registered agent, or both, in the agent. I am familiar with, and accept

Under Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, authorized by the corporation's board of directors. I hereby accept the appointment as registered agent under Florida Statutes.

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

(NOTE: registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition

TITLE **D**
 NAME **BARTHOLMEY, SCOTT D**
 STREET ADDRESS **8666 SEMINOLE BOULEVARD**
 CITY-ST-ZIP **SEMINOLE FL 33772**

1.1 TITLE **D S**
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

2.1 TITLE **D P**
 2.2 NAME **David R. Weber**
 2.3 STREET ADDRESS **2501 Anvil Street**
 2.4 CITY-ST-ZIP **St. Petersburg FL 33710**

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

3.1 TITLE
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

4.1 TITLE
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

5.1 TITLE
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

6.1 TITLE
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Printed 1/5/99

727-381-6522

Date

Daytime Phone #

CR2E034 (1/98)