2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000097840

Title:

Name:

Address:

City-St-Zip:

Entity Name: POHLMAN SHUTTERS, INC.

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FILED Feb 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 199 NW 28TH ST #9 BOCA RATON, FL 33431 US **Current Mailing Address: New Mailing Address:** 199 NW 28TH ST #9 BOCA RATON, FL 33431 US FEI Number: 59-3544224 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: POHLMAN, NICHOLAS K 199 NW 28TH STREET #9 BOCA RATON, FL 33431 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition POHLMAN, STEPHEN K Name: Name: 199 NW 28TH ST #9 Address: Address: City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: Title: Title: () Change () Addition () Delete Name: POHLMAN, NICHOLAS Name: 199 NW 28TH ST #9 Address: Address: BOCA RATON, FL 33431 City-St-Zip: City-St-Zip:

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.

Title:

Name:

Address:

City-St-Zip:

MRS

POHLMAN, ANGELA

199 NW 28TH ST. #9

BOCA RATON, FL 33431

() Change (X) Addition

SIGNATURE: NICHOLAS K. POHLMAN PRES 02/29/2008