

2/2003

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

<b>DOCUMENT #</b> P01000016684 <b>1. Entity Name</b> Any Storm Shutters, Inc.				FILED 03 APR 28 PM 3:03 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
<b>DO NOT WRITE IN THIS SPACE</b>					
<b>2. Principal Place of Business</b> 1014 SE 12th Ct. Suite, Apt. #, etc. Cape Coral, Florida City & State 33990 USA		<b>3. Mailing Address</b> 326 SE 31st St. Suite, Apt. #, etc. Cape Coral, Florida City & State 33904 USA		<b>4. FEI Number</b> 65-1100264 Applied For <input type="checkbox"/> Not Applicable	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		<b>7. Name and Address of Current Registered Agent</b> Name: Brett Bever Street Address (P.O. Box Number is Not Acceptable): 1014 SE 12th Ct. City: Cape Coral, FL 33990			
<b>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.</b>					
<b>SIGNATURE</b> _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
<b>January 1 - May 1 Fee is \$150.00</b> <b>After May 1, Fee is \$550.00</b> <b>Amended UBR is \$61.25</b> <b>Make Check Payable to Florida Department of State</b>			<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
<b>10. OFFICERS AND DIRECTORS</b>					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME
	BRETT BEVER	1014 SE 12th Ct.	Cape Coral, FL 33990		600017191726
	TOM SPRAGUE	326 SE 31st St.	Cape Coral, FL 33904		04/28/03--01069--008 **150.00
					600017191726
					04/28/03--01069--009 **150.00
<b>DO NOT WRITE IN THIS SPACE</b>					
<b>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 on an attachment with an address with all other like empowered.</b>					
<b>SIGNATURE:</b> <i>Thomas Sprague</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			4/4/03 (39) 772-8300 Date Daytime Phone #		

CR2E034B (12/02)

2/9/28

attachment

Any Storm Shutters, Inc.  
1014 SE 12<sup>th</sup> Court  
Cape Coral, FL 33990

April 4, 2003

Department of State  
Division of Corporations  
P.O. Box 6327  
409 East Gaines St.  
Tallahassee, FL. 32314

To Whom it May Concern,

I am writing you in behalf of, Any Storm Shutters, Inc. Our FIN is 65-1100264 and our Document # is P01000016684.

To date, we have not received our renewal for the UBS 2003 Business Report. I went to your website, [www.sunbiz.org](http://www.sunbiz.org) and it shows our current status as being "Inactive". We were never mailed the "For Profit Corporation (UBR)" for 2002.

I have downloaded a copy from your website and am enclosing a check for \$150.00 to put our business back in the "Active" status. I know this report is due before May 1<sup>st</sup>. If you should have any questions, please call me @ (230)772-8300. Your prompt attention to this matter is appreciated.

Sincerely,

Thomas Sprague  
(Director)