## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 440122**

FILED Apr 15, 2008 Secretary of State

Entity Name: GONSMAN CUSTOM DRAPERIES INC.

ountil F	imerpar r lac	e of Business:	New Principal Place	or Business.
	DERAL HWY. N BEACH, FL	334354926		
Current M	lailing Addre	ss:	New Mailing Addres	s:
	DERAL HWY. N BEACH, FL	334354926		
FEI Number	: 59-1496358	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:
104 SOUT	N, (JOHN H.) TH FEDERAL I N BEACH, FL			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,
	e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,
n the Stat	e of Florida. ´ RE:	submits this statement for the particles of Registered Agric Signature Of Registered Agric Signa		d office or registered agent, or both,  Date
in the Stat	e of Florida.  RE: Electro			
in the Stati	e of Florida.  RE: Electro	nic Signature of Registered Agong Trust Fund Contribution ( ).	ent	
in the Stati SIGNATU Election Cal OFFICER Title: Name: Address:	e of Florida.  RE: Electro  mpaign Financir  S AND DIRECT  P ( GONSMAN, (J 104 S FEDER.	nic Signature of Registered Agong Trust Fund Contribution ( ). CTORS: ) Delete OHN H.),	ent	Date
in the Stati	e of Florida.  RE: Electro  mpaign Financir  S AND DIREC  P ( GONSMAN, (J) 104 S FEDER, BOYNTON BE  V ( GONSMAN, TI) 104 S. FEDER	nic Signature of Registered Agr ng Trust Fund Contribution ( ). CTORS:  ) Delete OHN H.), AL HWY ACH, FL 33435  ) Delete NA L.	ent  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: TAMMY SLAGLE S 04/15/2008