2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # H09669

1. Entity Name

SUNTECH SHUTTER CORPORATION



Principal Place of Business

1791 BLOUNT ROAD

SUITE 812

POMPANO BEACH, FL 33069

Mailing Address

1791 BLOUNT ROAD

SUITE 812

POMPANO BEACH, FL 33069

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FILED Apr 23, 2008 8:00 am Secretary of State

04-23-2008 90016 032 ***150.00



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No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2432361

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HORWITZ, WAYNE CPA 800 CORPORATE DR STE 310

FORT LAUDERDALE, FL 33334

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	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	ed office or re	egistered agent, or	both, in the State of f	lorida. I am familiar	with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title i	applicable (NOTE: Registered	Agent signature	required when reinstating	2)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.				!	
10.	OFFICERS AND DIREC	CTORS	ľ			· · · · · · · · · · · · · · · · · · ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LOBIONDO, SALVATORE 1925 NW 80TH AVE. MARGATE, FL						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD LOBIONDO, GERALD 10057 NORTH SPRINGS WAY CORAL SPRINGS, FL 33076						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LOBIONDO, ROSE 1925 NW 80TH AVE MARGATE, FL			DO	V TON C	VRITE	The second secon
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CANGIALOSI, JOSEPHINE 2606 NW 88TH TERRACE CORAL SPRINGS, FL 33065			IN	THIS S	PACE	
TITLE NAME STREET ADDRESS CITY+ST-ZIP							
TITLE NAME		-		•	· · · · · · · · · · · · · · · · · · ·	。 ・	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

/4/17/08 Jo

954.979-545