

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H09669

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: SUNTECH SHUTTER CORPORATION

**Current Principal Place of Business:**

1791 BLOUNT ROAD  
SUITE 812  
POMPANO BEACH, FL 33069 US

**New Principal Place of Business:**

**Current Mailing Address:**

1791 BLOUNT ROAD  
SUITE 812  
POMPANO BEACH, FL 33069 US

**New Mailing Address:**

FEI Number: 59-2432361      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HORWITZ, WAYNE CPA  
800 CORPORATE DR  
STE 310  
FORT LAUDERDALE, FL 33334 US

**Name and Address of New Registered Agent:**

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: LOBIONDO, SALVATORE  
Address: 1925 NW 80TH AVE.  
City-St-Zip: MARGATE, FL

Title: VPD ( ) Delete  
Name: LOBIONDO, GERALD  
Address: 10057 NORTH SPRINGS WAY  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: SD ( ) Delete  
Name: LOBIONDO, ROSE  
Address: 1925 NW 80TH AVE  
City-St-Zip: MARGATE, FL

Title: TD ( ) Delete  
Name: CANGIALOSI, JOSEPHINE  
Address: 2606 NW 88TH TERRACE  
City-St-Zip: CORAL SPRINGS, FL 33065

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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.

SIGNATURE: SAL LOBIONDO

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04/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date