

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000063204

FILED
Apr 24, 2007
Secretary of State

Entity Name: YOUR HURRICANE SHUTTERS LLC

Current Principal Place of Business:

1602 ALTON RD
96
MIAMI BEACH, FL 33139

New Principal Place of Business:

6073 NW 167 STREET
C-7
MIAMI, FL 33015

Current Mailing Address:

1602 ALTON RD
96
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 20-5085405 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAINT-AMAND, CARL S
807 ALTON RD
2
MIAMI BEACH, FL 33139 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SAINT-AMAND, CARL S
Address: 807 ALTON RD SUITE 2
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGR () Delete
Name: SAINT-AMAND, REGINALD
Address: 807 ALTON RD SUITE 2
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES:

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 for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CARL S. SAINT-AMAND

MGRM

04/24/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date