2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000063204

Entity Name: YOUR HURRICANE SHUTTERS LLC

FILED Mar 25, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6073 NW 167 STREET C-7 MIAMI, FL 33015

Current Mailing Address: New Mailing Address:

1602 ALTON RD

MIAMI BEACH, FL 33139

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

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

SAINT-AMAND, CARL S 807 ALTON RD SAINT-AMAND, CARL S 1602 ALTON RD

2 #96 MIAMI BEACH, FL 33139 US #MIAMI BEACH, FL 33139 US

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: 03/25/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change () Addition SAINT-AMAND, CARL S SAINT-AMAND, CARL S Name: Name: Address: 807 ALTON RD SUITE 2 Address: 1602 ALTON RD SUITE 96 City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139

Title: MGR () Delete Title: MGR (X) Change () Addition Name: SAINT-AMAND, REGINALD Name: SAINT-AMAND, REGINALD Address: 807 ALTON RD SUITE 2 Address: 1602 ALTON RD SUITE 96 City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139

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 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 03/25/2008