2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000007354

18408 YARBROUGH AVE.

PORT CHARLOTTE, FL 33948

Address: City-St-Zip:

Entity Name: SWISS SHIELD SHUTTERS CORPORATION

FILED Mar 11, 2005 Secretary of State

| • | | |
|--------------------------------|--|--|
| Current P | rincipal Place of Business: | New Principal Place of Business: |
| 514 COLC | NIA LANE | 1060 KNIGHTS TRAIL ROAD |
| NOKOMIS, FL 34275 | | SUITE C |
| | | NOKOMIS, FL 34275 |
| Current Mailing Address: | | New Mailing Address: |
| | NIA LANE i, FL 34275 | 1060 KNIGHTS TRAIL ROAD SUITE C NOKOMIS, FL 34275 |
| FEI Number | : 65-0977046 FEI Number Applied For (|) FEI Number Not Applicable () Certificate of Status Desired () |
| Name and | Address of Current Registered Ager | nt: Name and Address of New Registered Agent: |
| HAFNER, 514 COLC NOKOMIS | | HAFNER, KARL H 1060 KNIGHTS TRAIL ROAD SUITE C NOKOMIS, FL 34275 US |
| | named entity submits this statement for e of Florida. | the purpose of changing its registered office or registered agent, or both, |
| SIGNATUI | RE: | 03/11/2005 |
| | Electronic Signature of Registere | |
| Election Ca | mpaign Financing Trust Fund Contribution() | |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |
| Title: | D () Delete | Title: () Change () Addition |
| Name: | HAFNER, KARL HEINZ | Name: |
| Address: City-St-Zip: | 9496 HAWKSMOOR LANE | Address: |
| City-St-Zip. | SARASOTA, FL 34238 | City-St-Zip: |
| Title: | D () Delete | Title: () Change () Addition |
| Name: | HAFNER, ADELHEID | Name: |
| Address: | 9496 HAWSMOOR LN | Address: |
| City-St-Zip: | SARASOTA, FL 34238 | City-St-Zip: |
| Title: | SO (X) Delete | Title: () Change () Addition |
| Name: | SCHENKER, PETER | Name: |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Address:

City-St-Zip:

SIGNATURE: KARL HEINZ HAFNER D 03/11/2005