

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000010565

Entity Name: STORM TECH SHUTTERS, INC.

FILED
Jan 21, 2009
Secretary of State

Current Principal Place of Business:

2910 HUNTER ST
REAR BUILDING
FORT MYERS, FL 33916

Current Mailing Address:

5351 COLONY CT
CAPE CORAL, FL 33904

New Principal Place of Business:

2910 HUNTER ST
REAR BUILDING
FORT MYERS, FL 33990

New Mailing Address:

1930 SE 21ST TER
CAPE CORAL, FL 33990

FEI Number: 65-0974531

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOMBROWSKI, ALIZA
5351 COLONY CT
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

DOMBROWSKI, ALIZA
1930 SE 21ST TER
CAPE CORAL, FL 33904 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: ALIZA DOMBROWSKI

01/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HEMED, DAVID
Address: 1930 SE 21ST TERR
City-St-Zip: CAPE CORAL, FL 33990

Title: VT () Delete
Name: HEMED, JACOB
Address: 2107 SW 52ND ST
City-St-Zip: CAPE CORAL, FL 33914

Title: S () Delete
Name: DOMBROWSKI, ALIZA
Address: 5351 COLONY CT
City-St-Zip: CAPE CORAL, FL 33904

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:

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: DAVID HEMED

P

01/21/2009

Electronic Signature of Signing Officer or Director

Date