

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000011061

FILED
Apr 29, 2008
Secretary of State

Entity Name: SUPERIOR STORM SHUTTERS, INC.

Current Principal Place of Business:

4918 S.W. 25TH COURT
CAPE CORAL, FL 33914

New Principal Place of Business:

6659 BROKEN ARROW ROAD
FORT MYERS, FL 33912

Current Mailing Address:

4918 S.W. 25TH COURT
CAPE CORAL, FL 33914

New Mailing Address:

6659 BROKEN ARROW ROAD
FORT MYERS, FL 33912

FEI Number: 65-0974835

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETRONE, MICHAEL A
4918 S.W. 25TH COURT
CAPE CORAL, FL 33914 US

Name and Address of New Registered Agent:

PETRONE, MICHAEL A
6659 BROKEN ARROW ROAD
FORT MYERS, FL 33912 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:

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: PETRONE, MICHAEL A
Address: 4918 SW 25TH COURT
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: PETRONE, MICHAEL A
Address: 6659 BROKEN ARROW ROAD
City-St-Zip: FORT MYERS, FL 33912

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: MICHAEL A. PETRONE

DPST

04/29/2008

Electronic Signature of Signing Officer or Director

Date