FILE NOW: PENALTY APPLIES

PROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
02 APR 19 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000085230
Corporation Name

B.R. SHUTTERS,INC.

Principal Place of Business	Mailing Address
3032 NW 21 Ct Miami, Fl. 33142	3032 NW 21 Ct Miami, Fl,33142

3. Date Incorporated or Qualified: 9/8/2000
3a. Date of Last Report:

Principal Place of Business	2a. Mailing Address
6299 SW 138 PL	26 6299 SW 138 PL
Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
City & State: Miami, Fl.	28 City & State: Miami, Fl.
Zip: 33183 Country: 25 USA	29 Zip: 33183 Country: 30 USA

4. FEI Number: 65-1041214 ☐ Applied For ☐ Not Applicab

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

Roberto Espinosa
3032 NW 21 Ct.
Miami,Fl. 33142

10. Name and Address of New Registered Agent

81 Name: Ida Mendoza
82 Street Address (P.O. Box Number is Not Acceptable): 8760 SW 133 Ave. Rd.
83: #201 Bldg 9
84 City: Miami FL 85 Zip Code: 33183

Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Ida Mendoza — IDA MENDOZA — 4/18/02
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
LE	☒ DELETE	11 TITLE	PVST-D ☐ Change ☒ Additio
ME	PVST-D	12 NAME	Ida Mendoza
REET ADDRESS	Roberto Espinosa	13 STREET ADDRESS	8760 SW 133 Ave Rd#201 Bldg 9
Y-ST-ZIP	3032 NW 21 Ct Miami, Fl. 33142	14 CITY-ST-ZIP	Miami, Fl. 33183
LE	☐ DELETE	21 TITLE	☐ Change ☐ Additio
ME		22 NAME	100005349711--0
REET ADDRESS		23 STREET ADDRESS	-04/25/02--01077--013
-ST-ZIP		24 CITY-ST-ZIP	****150.00 ****150.00
LE	☐ DELETE	31 TITLE	☐ Change ☐ Additio
ME		32 NAME	
REET ADDRESS		33 STREET ADDRESS	
-ST-ZIP		34 CITY-ST-ZIP	
LE	☐ DELETE	41 TITLE	☐ Change ☐ Additio
ME		42 NAME	
REET ADDRESS		43 STREET ADDRESS	
-ST-ZIP		44 CITY-ST-ZIP	
LE	☐ DELETE	51 TITLE	☐ Change ☐ Additio
ME		52 NAME	
REET ADDRESS		53 STREET ADDRESS	
-ST-ZIP		54 CITY-ST-ZIP	
LE	☐ DELETE	61 TITLE	☐ Change ☐ Additio
ME		62 NAME	
REET ADDRESS		63 STREET ADDRESS	
-ST-ZIP		64 CITY-ST-ZIP	

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ida Mendoza IDA MENDOZA (PRES) 4/18/02