2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 04, 2006
Secretary of State

DOCUMENT# P03000011403

Entity Name: COVER ME BLINDS, INC.

Current Principal Place of Business:

1110 CHELSEA PARC DRIVE
CLERMONT, FL 34715 US

New Principal Place of Business:

21401 TREE PARK CT
CLERMONT, FL 34711 US

Current Mailing Address:

1110 CHELSEA PARC DRIVE
CLERMONT, FL 34715

New Mailing Address:

21401 TREE PARK CT
CLERMONT, FL 34711 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: ALVELO, HECTOR MANUEL
Address: 1110 CHELSEA PARC DRIVE
City-St-Zip: CLERMONT, FL 34715 US

Title: S ( ) Delete
Name: ALVELO, LIZETTE
Address: 1110 CHELSEA PARC DRIVE
City-St-Zip: CLERMONT, FL 34715

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition
Name: ALVELO, HECTOR M
Address: 21401 TREE PARK CT
City-St-Zip: CLERMONT, FL 34711 US

Title: S (X) Change ( ) Addition
Name: ALVELO, LIZETTE
Address: 21401 TREE PARK CT
City-St-Zip: CLERMONT, FL 34711

I hereby certify that the information supplied with this filing does not qualify for the 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: HECTOR M ALVELO PTD 09/04/2006

Electronic Signature of Signing Officer or Director — Date