

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000095357

**FILED**  
**Mar 22, 2012**  
**Secretary of State**

**Entity Name:** SHOWER SOLUTIONS USA, INC.

**Current Principal Place of Business:**

223 ALTAMONTE COMMERCE BLVD  
SUITE 1318  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 163197  
ALTAMONTE SPRINGS, FL 32716

**New Mailing Address:**

**FEI Number:** 20-0188658

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JOHNSON, ROBERT  
223 ALTAMONTE COMMERCE BLVD.  
SUITE 1318  
ALTAMONTE SPRINGS, FL 32714 US

**Name and Address of New Registered Agent:**

JOHNSON, LINDA  
223 ALTAMONTE COMMERCE BLVD.  
SUITE 1318  
ALTAMONTE SPRINGS, FL 32714 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: LINDA JOHNSON

03/22/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: JOHNSON, CHARLES  
Address: PO BOX 163197  
City-St-Zip: ALTAMONTE SPRINGS, FL 32716

I hereby 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 all other like empowered.

SIGNATURE: CHARLES JOHNSON

PRES

03/22/2012

Electronic Signature of Signing Officer or Director

Date