

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000141903

FILED
Feb 19, 2008
Secretary of State

Entity Name: EVERYTHING SCREEN REPAIR, INC.

Current Principal Place of Business:

500 WELLESLEY ST.
OVIEDO, FL 32765

New Principal Place of Business:

1054 MANIGAN AVE
OVIEDO, FL 32765

Current Mailing Address:

P.O. BOX 621653
OVIEDO, FL 327621653

New Mailing Address:

P.O. BOX 621653
OVIEDO, FL 32762

FEI Number: 20-0528544

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TREAT, MICHAEL A
174 HILL ST
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

TREAT, MICHAEL A
1054 MANIGAN AVE
OVIEDO, FL 32765 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:

02/19/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TREAT, MICHAEL A
Address: 174 HILL ST
City-St-Zip: CASSELBERRY, FL 32707

Title: VS () Delete
Name: TREAT, LESLIE I
Address: 174 HILL ST
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TREAT, MICHAEL A
Address: 1054 MANIGAN AVE
City-St-Zip: OVIEDO, FL 32765

Title: VS (X) Change () Addition
Name: TREAT, LESLIE I
Address: 1054 MANIGAN AVE
City-St-Zip: OVIEDO, FL 32765

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. TREAT

PRES

02/19/2008

Electronic Signature of Signing Officer or Director

Date