## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000028074

Entity Name: ULTRA SHUTTERS, INC.

FILED May 26, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

6927 COZUMEL CT. 6750 DALI AVE LAND O LAKES, FL 34639

104

LAND O LAKES, FL 34637 US

**Current Mailing Address:** New Mailing Address:

6927 COZUMEL CT. 6750 DALI AVE

LAND O LAKES, FL 34639 LAND O LAKES, FL 34637 US

FEI Number: 29-0397859 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CANADA, TARA E CANADA, TARA E 6927 COZUMEL CT. 6750 DALI AVE

LAND O LAKES, FL 34639 US LAND O LAKES, FL 34637 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: TARA E CANADA 05/26/2006

> 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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

CANADA, PAUL E Name: Name: CANADA, TARA E 6927 COZUMEL CT. 6750 DALI AVE Address: Address:

City-St-Zip: LAND O LAKES, FL 34639 City-St-Zip: LAND O LAKES, FL 34637 US

Title: VP,S (X) Delete Title: () Change () Addition

Name: CANADA, TARA E Name: 6927 COZUMEL CT. Address: Address: LAND O LAKES, FL 34639 City-St-Zip: City-St-Zip:

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: TARA E CANADA **PST** 05/26/2006