

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000069268

FILED
May 22, 2006
Secretary of State

Entity Name: TREASURE COAST SHUTTERS, INC.

Current Principal Place of Business:

3855 ATLANTIC BLVD
VERO BEACH, FL 32960

New Principal Place of Business:

19 43RD AVENUE
VERO BEACH, FL 329682373 US

Current Mailing Address:

3855 ATLANTIC BLVD
VERO BEACH, FL 32960

New Mailing Address:

19 43RD AVENUE
VERO BEACH, FL 329682373 US

FEI Number: 20-2852046

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARK, ROBERT C ESQ.
1705 19TH PLACE
VERO BEACH, FL 32960 US

Name and Address of New Registered Agent:

SHAPIRO, JOSEF D
19 43RD COURT
VERO BEACH, FL 329682373 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: JOSEF D. SHAPIRO

05/22/2006

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:

Title: PSTD () Delete
Name: SHAPIRO, JOSEF
Address: 3855 ATLANTIC BLVD
City-St-Zip: VERO BEACH, FL 32960

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: SHAPIRO, JOSEF D
Address: 19 43RD COURT
City-St-Zip: VERO BEACH, FL 329682373 US

Title: VPD () Change (X) Addition
Name: SMIDI, SAID
Address: 296 11TH COURT
City-St-Zip: VERO BEACH, FL 329622837 US

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: JOSEF D. SHAPIRO

PTSD

05/22/2006

Electronic Signature of Signing Officer or Director

Date