2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2006
Secretary of State

DOCUMENT# P05000104623

Entity Name: HURRICANE SHUTTERS ENTERPRISES, INC.

Current Principal Place of Business:

480 TALL PINES ROAD
SUITE F
WEST PALM BEACH, FL 33413

New Principal Place of Business:

Current Mailing Address:

480 TALL PINES ROAD
SUITE F
WEST PALM BEACH, FL 33413

New Mailing Address:

FEI Number: 51-0549509 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BONILLA, NESTOR
173 COCOPLUM LANE
ROYAL PALM BEACH, FL 33411 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: PD ( ) Delete
Name: BONILLA, NESTOR
Address: 173 COCOPLUM LANE
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: SD ( ) Delete
Name: MATOS, WILLIAM
Address: 1683 WOODBRIDGE LAKES CIRCLE
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: CEOD ( ) Delete
Name: ORNELAS, PETER
Address: 165 PONCE DE LEON STREET
City-St-Zip: ROYAL PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change ( ) Addition
Name: MATOS, WILLIAM
Address: 9220 BOUQUET ROAD
City-St-Zip: LAKE WORTH, FL 33467

Title: ( ) Change ( ) Addition
Name:
Address:
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: NESTOR BONILLA PD 07/05/2006

Electronic Signature of Signing Officer or Director Date