## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000047917

FILED Apr 12, 2007 Secretary of State

Entity Name: VERO SH	IUTTERS, INC.			
Current Principal Place of Business:		New Principal Place of Business:		
988 18 AVE SW VERO BEACH, FL 32962	2			
Current Mailing Address:		New Mailing Address:		
988 18 AVE SW VERO BEACH, FL 32962	2			
FEI Number:	FEI Number Applied For ( )	FEI Number Not Applicable (X)	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
MESSARINA, GINO 988 18 AVE SW VERO BEACH, FL 32962	2 US			
The above named entity s in the State of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent		ent	Date	
Election Campaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	

Title: ( ) Delete Title: (X) Change ( ) Addition MESSARINA, GINO MESSARINA, GINO Name: Name: 2307 BRUNER LANE #3 2307 BRUNER LANE #3 Address: Address: City-St-Zip: FORT MYERS, FL 33912 City-St-Zip: FORT MYERS, FL 33912

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

DEVERELL, PAUL MESSARINA, LUIGI Name: Name: Address: 531 BLUE RD Address: 1161 COMMERCE AVE CORAL GABLES, FL 33146 VERO BEACH, FL 32960 City-St-Zip: City-St-Zip:

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

Name: MESSARINA, LUIGI Name: MOUSSA, MARWA Address: 1161 COMMERCE AVE Address: 2307 BRUNER LANE # 3 City-St-Zip: VERO BEACH, FL 32960 City-St-Zip: FORT MYERS, FL 33912

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: GINO MESSARINA Ρ 04/12/2007