



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2008 8:00 am
Secretary of State

03-06-2008 90048 029 ***158.75

DOCUMENT # P06000073205 1. Entity Name SHUTTER UP INDUSTRIES, INC.					
Principal Place of Business 3080 SPRINGFIELD LANE LAKE WORTH, FL 33461			Mailing Address 3080 SPRINGFIELD LANE LAKE WORTH, FL 33461		
2. Principal Place of Business - No P.O. Box # 1200 SCOTIA DRIVE Suite, Apt. #, etc. 303		3. Mailing Address 1200 SCOTIA DRIVE Suite, Apt. #, etc. 303			
City & State HYPOLUXO Zip 33462		City & State FL Zip Country		4. FEI Number 56-2581655 Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				01092008 Chg-P CR2E034 (12/06)	
6. Name and Address of Current Registered Agent KOBOSKO, JEREMEY 3080 SPRINGFIELD LANE LAKE WORTH, FL 33461			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KOBOSKO, JEREMEY 3080 SPRINGFIELD LANE LAKE WORTH, FL 33461	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KOBOSKO, BRIAN 3105 VASSALLO AVE LAKE WORTH, FL 33461	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BLICKLEY, DEBORAH MD 1200 SCOTIA DRIVE #303 HYPOLUXO, FL 33462	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BLICKLEY, WAYNE H 1200 SCOTIA DR #303 HYPOLUXO, FL 33462	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Jeremeys Law</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		X 3/3/08 <small>Date</small>		X 561-441-9753 <small>Daytime Phone #</small>	