2007 FOR PROFIT CORPORATION ANNUAL REPORT

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Secretary of State DOCUMENT # P06000075211 03-08-2007 90009 043 ***150.00 RAPID SHUTTER SERVICES, INC. Principal Place of Business Mailing Address **504 WEST DREW STREET 504 WEST DREW STREET** 40031744 LANTANA, FL 33462 US LANTANA, FL 33462 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 504 WEST DREW STREET SAME Suite, Apt. #, etc. Suite, Apt. #, etc. 02272007 CR2E034 (12/06) Applied For City & State City & State 20-4966630 LANTANA, FL 33462 SAME Not Applicable Country SAME Zip Country \$8.75 Additional 5. Certificate of Status Desired U. S. A 33462 SAME Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Justin Aloneftis BERMAN, SCOTT Street Address (P.O. Box Number is Not Acceptable), 504 West Drew Street **504 WEST DREW STREET** LANTANA, FL 33462 City LANTANA 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 familia the obligations of registered agent SIGNATURE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fee: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. PD Change TITLE Addition TITLE Delete AWNEFTIS, JUSTIN STREET BERMAN, SCOTT NAME **504 WEST DREW STREET** STREET ADDRESS STREET ADDRESS 33462 CITY-ST-ZIP LANTANA, FL 33462 City-ST-ZIP LANTANA, FL VP D ☐ Change Addition IIILE Delete O 9V TYLER ALONEPTIS ALONEFTIS, JUSTIN NAME NAME SOA WEST PREW STREET LANTANA, FL 33462 433 - 52ND STEET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33407 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS City-St-ZIP CITY-ST-ZIP Change ☐ Addition TITLE □ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITI F ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 reduct 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.

Tirtin Alanoftic 2/27/07/07/043-9668

FILED

Mar 08, 2007 8:00 am