

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000104648

FILED
Feb 09, 2009
Secretary of State

Entity Name: BLINDS & SHUTTERS BY DISCOUNT MIKE, INC.

Current Principal Place of Business:

13014 AUBREY LANE
WINTER GARDEN, FL 34787

New Principal Place of Business:

Current Mailing Address:

13014 AUBREY LANE
WINTER GARDEN, FL 34787

New Mailing Address:

FEI Number: 20-5360094

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOSS, MAURICE
13014 AUBREY LANE
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

MOSS, LYNNE
13014 AUBREY LANE
WINTER GARDEN, FL 34787 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: LYNNE MOSS

02/09/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOSS, MAURICE
Address: 13014 AUBREY LANE
City-St-Zip: WINTER GARDEN, FL 34787

Title: VP () Delete
Name: MOSS, BRANDON
Address: 13014 AUBREY LANE
City-St-Zip: WINTER GARDEN, FL 34787

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: MOSS, MAURICE
Address: 13014 AUBREY LANE
City-St-Zip: WINTER GARDEN, FL 34787

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

Title: P () Change (X) Addition
Name: MOSS, LYNNE
Address: 13014 AUBREY LANE
City-St-Zip: WINTER GARDEN, FL 34787

I hereby certify that the information supplied with this filing does not qualify 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: LYNNE MOSS

P

02/09/2009

Electronic Signature of Signing Officer or Director

Date