

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000030580

FILED
Dec 11, 2008
Secretary of State

Entity Name: SUPERIOR CUSTOM SHUTTERS, INC.

Current Principal Place of Business:

620 DOUGLAS AVENUE, SUITE 1302
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

620 DOUGLAS AVENUE, SUITE 1302
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 20-8596686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAR, PRYABRATA
1846 HIGHNESS CT
ORLANDO, FL 32810 US

Name and Address of New Registered Agent:

DANIELS, DAVID
1846 HIGHNESS CT
ORLANDO, FL 32810 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: DAVID DANIELS

12/11/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SAR, PRIYABRATA
Address: 457 SUNLAKE CIRCLE, APT 209
City-St-Zip: LAKE MARY, FL 32746

Title: D () Delete
Name: DANIELS, DAVID
Address: 1846 HIGHNESS CT
City-St-Zip: ORLANDO, FL 32810

Title: D () Delete
Name: DANIELS, ARIEL
Address: 1846 HIGHNESS CT
City-St-Zip: ORLANDO, FL 32810

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DANIELS, DAVID
Address: 1846 HIGHNESS CT
City-St-Zip: ORLANDO, FL 32810

Title: D (X) Change () Addition
Name: DANIELS, GOVINDA
Address: 1846 HIGHNESS CT
City-St-Zip: ORLANDO, FL 32810

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

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: DAVID DANIELS

MR.

12/11/2008

Electronic Signature of Signing Officer or Director

Date