

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000062183

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** AMERICAN SHUTTER ASSURANCE, INC.

**Current Principal Place of Business:**

4911 SW 101 AVE  
COOPER CITY, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

4911 SW 101 AVE  
COOPER CITY, FL 33328

**New Mailing Address:**

**FEI Number:** 39-2056075      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ZYLA, JASON  
4911 SW 101 AVE  
COOPER CITY, FL 33328      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P,T  
Name: ZYLA, JASON  
Address: 4911 SW 101 AVE  
City-St-Zip: COOPER CITY, FL 33328

Title: D,S  
Name: ZYLA, JASON  
Address: 4911 SW 101 AVE  
City-St-Zip: COOPER CITY, FL 33328

I hereby 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 all other like empowered.

SIGNATURE: JASON ZYLA

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

VP

04/26/2012

\_\_\_\_\_  
Date