

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000082177

FILED
May 27, 2009
Secretary of State

Entity Name: SHOWER DOOR SPECIALIST, INC.

Current Principal Place of Business:

10870 PALM RIDGE LANE
TAMARAC, FL 33321 US

New Principal Place of Business:

7670 NW 32 ST
DAVIE, FL 33024

Current Mailing Address:

10870 PALM RIDGE LANE
TAMARAC, FL 33321 US

New Mailing Address:

7670 NW 32 ST
DAVIE, FL 33024

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

REPISO, MIGUEL
10870 PALM RIDGE LANE
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

CRESPO, PATRICIA
7670 NW 32 ST
DAVIE, FL 33024 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: PATRICIA CRESPO

05/27/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: REPISO, MIGUEL
Address: 10870 PALM RIDGE LANE
City-St-Zip: TAMARAC, FL 33321 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CRESPO, PATRICIA
Address: 7670 NW 32 ST
City-St-Zip: DAVIE, FL 33024 US

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: PATRICIA CRESPO

D

05/27/2009

Electronic Signature of Signing Officer or Director

Date