

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000079379

FILED
Mar 09, 2009
Secretary of State

Entity Name: BLUE COAST STORM SHUTTERS, INC.

Current Principal Place of Business:

2511 N.W. 17TH LANE B-3
POMPAÑO BEACH, FL 33064 US

New Principal Place of Business:

Current Mailing Address:

5954 NW 80 TERRACE
PARKLAND, FL 33067

New Mailing Address:

FEI Number: 65-0532131

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARIOLI, GIUSEPPE
5954 NW 80 TERRACE
PARKLAND, FL 33067 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BARIOLI, GIUSEPPE
Address: 5954 NW 80 TERRACE
City-St-Zip: PARKLAND, FL 33067

Title: T () Delete
Name: STOWE, MICHAEL
Address: 5954 NW 80 TERR
City-St-Zip: PARKLAND, FL 33067

Title: S (X) Delete
Name: BARIOLI, RAFFAELE
Address: 5954 NW 80 TERR
City-St-Zip: PARKLAND, FL 33067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ST (X) Change () Addition
Name: BARIOLI, RAFFAELE
Address: 5954 N W 80TH TERRACE
City-St-Zip: PARKLAND, FL 33067

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: GIUSEPPE BARIOLI

D

03/09/2009

Electronic Signature of Signing Officer or Director

Date