

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000048977

FILED
Feb 10, 2004
Secretary of State

Entity Name: OCEAN SHUTTERS MANUFACTURING, INC.

Current Principal Place of Business:

4900 NE11TH AVE
FT LAUDERDALE, FL 33334 US

New Principal Place of Business:

Current Mailing Address:

4900 NE 11TH AVE
FT LAUDERDALE, FL 33334 US

New Mailing Address:

FEI Number: 65-0626267

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARINO, LUCILLE
4900 NE 11TH AVE
FT LAUDERDALE, FL 33334 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: PD () Delete
Name: MARINO, LUCILLE
Address: 4900 NE 11TH AVE
City-St-Zip: FT LAUDERDALE, FL 33334

Title: V () Delete
Name: PFEIFER, DOROTHY
Address: 1390 NW 70 TERRACE
City-St-Zip: POMPANO BEACH, FL 33063

Title: V () Delete
Name: MAZUR, MICHEAL
Address: 8030 NW 46 COURT
City-St-Zip: FORT LAUDERDALE, FL 33351

Title: V () Delete
Name: ROTTMUND, MARY A
Address: 1985 SCOTT STREET
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LUCILLE A. MARINO

PD

02/10/2004

Electronic Signature of Signing Officer or Director

Date