

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Feb 27 1998 8:00am  
Secretary of State

DOCUMENT # P96000030635 (2)

1. Corporation Name

CAYMAN SHUTTERS, INC.

Principal Place of Business

Mailing Address

8446 NW 58 ST  
MIAMI FL 33166

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MIAMI FL 33166

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/09/1996

4. FEI Number

65-0662153

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution



\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.



Yes



No

9. Name and Address of Current Registered Agent

JAIME, CAMILO A  
6755 SW 88 ST  
MIAMI FL 33156

10. Name and Address of New Registered Agent

81 Name CAMILO M. JAIME

82 Street Address (P.O. Box Number is Not Acceptable)

1116 LUGO AVE.

83 CORAL GABLES BY THE SEA

84 City CORAL GABLES FL

85 Zip Code 33156

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*Camilo M. Jaime* PRES. CAMILO M. JAIME

(NOTE: Registered Agent signature required when installing)

1/20/98

DATE

12. OFFICERS AND DIRECTORS

TITLE PS ☐ DELETE

NAME JAIME, CAMILO A  
STREET ADDRESS 6755 SW 88 ST B121  
CITY - ST - ZIP MIAMI FL 33156

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

PS. CAMILO M. JAIME ☒ Change ☐ Addition

PRESIDENT AND SECRETARY

1116 LUGO AVE.

CORAL GABLES FL 33156

2.1 TITLE V.T. VKEPRES AND TREAS. ☒ Change ☐ Addition

2.2 NAME VIVIAN M. JAIME

2.3 STREET ADDRESS 1116 LUGO AVE

2.4 CITY - ST - ZIP CORAL GABLES FL

33156

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE:

*Camilo M. Jaime* CAMILO A JAIME 2/20/98 305-418-4410

CR2E034 (10/97)