

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

FILED

May 18 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Northam</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000046730 (3)**

1. Corporation Name

**CUSTOM STORM SHUTTERS, INC.**



Principal Place of Business

**3010 S.W. 14TH PLACE  
SUITE #10  
BOYNTON BEACH FL 33426**

Mailing Address

**3010 S.W. 14TH PLACE  
SUITE #10  
BOYNTON BEACH FL 33426**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**05/29/1996**

4. FEI Number

**65-0672783**

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

2. Principal Place of Business

**21 215 S.E. 8th Avenue**

2a. Mailing Address

**26 215 S.E. 8th Avenue**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

**23 Boynton Beach, FL**

City & State

**28 Boynton Beach, FL**

Zip

**24 33435**

Country

**25 Palm Beach**

Zip

**29 33435**

Country

**30 Palm Beach**

9. Name and Address of Current Registered Agent

**ZAZZIRA, RONALD A  
3010 S.W. 14TH PLACE  
SUITE #10  
BOYNTON BEACH FL 33426**

10. Name and Address of New Registered Agent

81 Name

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

**215 SE 8th Avenue**

83

84 City

**Boynton Beach**

FL

85 Zip Code

**33435**

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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

*[Signature]*

(NOTE: Registered Agent's signature required when reinstating)

**4/29/98**

12. OFFICERS AND DIRECTORS

☐ DELETE

**PSD  
ZAZZIRA, RONALD A  
3010 SW 14TH PLACE 10  
BOYNTON BEACH FL 33426**

☐ DELETE

**VTD  
PEZZO, FRANK  
3010 S.W. 14TH PLACE #10  
BOYNTON BEACH FL 33426**

☐ DELETE

**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**

☐ DELETE

**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**

☐ DELETE

**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**

☐ DELETE

**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

**215 SE 8th Avenue  
Boynton Beach, FL 33435**

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

**215 SE 8th Avenue  
Boynton Beach, FL 33435**

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 if changed, or on an attachment with an address.

SIGNATURE: X

*[Signature]*

**President**

**4/29/98**

**(561) 369-3773**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

License # 0323762

CR2E034 (10/97)