

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000046730

FILED  
Feb 23, 2007  
Secretary of State

Entity Name: CUSTOM STORM SHUTTERS, INC.

## Current Principal Place of Business:

215 SE 8TH AVENUE  
BOYNTON BEACH, FL 33435 US

## New Principal Place of Business:

## Current Mailing Address:

215 SE 8TH AVENUE  
BOYNTON BEACH, FL 33435 US

## New Mailing Address:

FEI Number: 65-0672783      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ZAZZIRA, RONALD A  
215 SE 8TH AVENUE  
\*\*\*\*\*  
BOYNTON BEACH, FL 33435 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: SD ( ) Delete  
Name: ZAMMATARO, PATRICIA  
Address: 215 SE 8TH AVENUE  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: VTD ( ) Delete  
Name: PEZZO, FRANK A  
Address: 215 SE 8TH AVENUE  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: P ( ) Delete  
Name: ZAZZIRA, RONALD A  
Address: 215 SE 8TH AVE  
City-St-Zip: BOYNTON BEACH, FL 33435

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: PRES (X) Change ( ) Addition  
Name: ZAZZIRA, RONALD A  
Address: 215 SE 8TH AVE  
City-St-Zip: BOYNTON BEACH, FL 33435

I hereby certify that the information supplied with this filing does not qualify for the 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 ZAMMATARO

SD

02/23/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date