FILED May 13, 2002 8:00 am Secretary of State

1000 FOR PROFIT	CORPORATION
UNIFORM BUSIN	CORPORATION IESS REPORT (UBR)
DOOLULATINE "	

DOCUMENT # P97000004938 05-13-2002 90155 015 ***150.00 1. Entity Name CONTEMPORARY SHUTTER SYSTEMS INC. DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 401 E BANANA CAY DR 3. Mailing Address 401 E BANANA CAY DR Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For SOUTH DAYTONA FL SOUTH DAYTONA FL 59-3420910 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 32119 VOLUSIA 32119 VOLUSIA Fee Required 7. Name and Address of Current Registered Agent Name COOK; RAYMOND-H-JR DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) 401 E BANANA CAY IN THIS SPACE City Zip Code 3 2 1 1 9 SOUTH DAYTONA 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NO1L: Registered Agent signature required when reinstating) January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible After May 1, Fee is \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Amended UBR is \$61.25 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS PVST TITLE CR2E034B (12/01) TITLE NAME COOK, RAYMOND H JR NAME STREET ADDRESS 401 E BANANA CAY DR STREET ADDRESS SOUTH DAYTONA FL CITY-ST-ZIP 32119 CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY - ST - 7/P CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - 7IP CITY-ST-7IP TITLE TITLE MAME NAME STREET ADDRESS STREET ADDRESS CITY ST ZIP CITY-ST-ZIP 13. 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 report or supplemental 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 epipowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other life impowered.

RAYMOND HEOOKIL.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-02