

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 16, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P97000046034**

1. Entity Name  
**SHOWER DOORS UNLIMITED INC.**



Principal Place of Business  
**744 BARNETT DR  
SUITE 3  
LAKE WORTH, FL 33461 US**

Mailing Address  
**744 BARNETT DR  
SUITE 3  
LAKE WORTH, FL 33461 US**

**DO NOT WRITE IN THIS SPACE**



07022004 No Chg-P CR2E034 (10/03)

4. FEI Number  
**65-0757366**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**SORBER, LINDA  
12970 51ST COURT NORTH  
ROYAL PALM BEACH, FL 33411**

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Linda Sorber*  
Signature, typed or printed name of registered agent and title if appropriate

(NOTE: Registered Agent signature required when reinstating)

DATE

*8/12/04*

**FILE NOW!!! FEE IS \$150.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	SORBER, LINDA
STREET ADDRESS	12970 51ST CT N
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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08/16/04-80005-009 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: *Linda Sorber* **LINDA SORBER, PRES.** *8/12/04* *561-547-0702*  
Signature and typed or printed name of signing officer or director Date Daytime Phone #