

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000065919

Entity Name: MASTER INSTALLATION, INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

14 HEMLOCK LN
TEQUESTA, FL 33469

New Principal Place of Business:

5955 SE WINDSONG LANE
STUART, FL 34997

Current Mailing Address:

14 HEMLOCK LN
TEQUESTA, FL 33469

New Mailing Address:

5955 SE WINDSONG LANE
STUART, FL 34997

FEI Number: 65-0852848

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARBERA, ALAIN
14 HEMLOCK LN
TEQUESTA, FL 33469 US

Name and Address of New Registered Agent:

BARBERA, ALAIN
5955 SE WINDSONG LANE
STUART, FL 34997 US

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:

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BARBERA, ALAIN
Address: 14 HEMLOCK LN
City-St-Zip: TEQUESTA, FL 33469

Title: D () Delete
Name: BARBERA, KATHRYN
Address: 14 HEMLOCK LN
City-St-Zip: TEQUESTA, FL 33469

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BARBERA, ALAIN
Address: 5955 SE WINDSONG LANE
City-St-Zip: STUART, FL 34997

Title: D (X) Change () Addition
Name: BARBERA, KATHRYN
Address: 5955 SE WINDSONG LANE
City-St-Zip: STUART, FL 34997

I hereby certify that the information supplied with this filing does not qualify 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: KATHRYN BARBERA

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date