

P99000087375

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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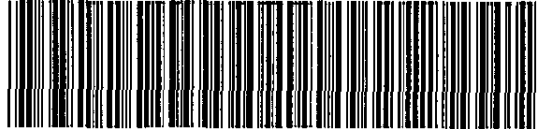
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: COASTAL SHUTTERS, INC.
(Name of Corporation)

DOCUMENT NUMBER: P99000087375

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROBERT I. CICERO

(Name of Person)

COASTAL SHUTTERS, INC.

(Name of Firm/Company)

4595 NW 37th COURT

(Address)

MIAMI, FLORIDA 33142

(City/State and Zip Code)

For further information concerning this matter, please call:

ROBERT I. CICERO at (305) 633-9650

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

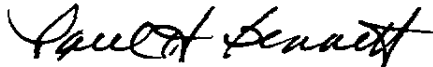
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, PAUL H. BENNETT, hereby resign as AN OFFICER
(Title)

of COASTAL SHUTTERS, INC.,
(Name of Corporation)

P99000087375, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA



(Signature of resigning officer/director)

*The vacancy resulting from this resignation shall be
filled by Robert E. Cicero*

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TALLAHASSEE FLORIDA

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314