2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

S72311 **DOCUMENT #**

THE PLANTATION SHUTTER COMPANY



FILED May 02, 2003 8:00 am & Secretary of State

05-02-2003 90415 013 ***150.00

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Principal Place of Business 1089 ATLANTIC BLVDS. #3 ATLANTIC BEACH FL 32233		Mailing Address 1089 ATLANTIC BLVDS. #3 ATLANTIC BEACH FL 32233					
2. Principal Place of Business		3. Mailing Address			818 11 818 11 81811 1	1888 BABAL 1881	
Suite, Apt. #, etc.		Suite, Apt. #,	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES		
City & State		City & State			4. FEI Number 59-3086882	 +	oplied For ot Applicable
Zip	Country	Zip	Cour	ntry	5. Certificate of Status Desired	\$8.75 Ad Fee Require	
	6. Name and Address of Curre	nt Registered Agent			7. Name and Address of New Registered	Agent	
				Name			
	ANTIC BLVD #3		Street Address		(P.O. Box Number is Not Acceptable)		
ATLANTIC	C BEACH FL 32233						
				City	Fi	Zip Cod	e
P. The about	named entity submits this statement	for the purpose of ohe	anging its register	rod office or regist	ered agent, or both, in the State of Florida. Lam		and accept
	tions of registered agent.	tor the purpose of the	anging its register	rea onice or region	ered agent, or ooth, in the state of Florida. Tan	riarima war,	and accept
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable,	(NOTE: Registere	ed Agent signature requi	red when reinstating) DATE		
Afte	FILE NOW !!! FEE IS \$150.00 or May 1, 2003 Fee will be \$550.00 k Payable to Florida Department			,	9. Election Campaign Financing Trust Fund Contribution.		0 May Be d to Fees
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12. 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 port 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 be empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if indicated on this report or supplement of the corporation or the receiver of changed, or on an attachment w dress, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP