


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2007 08:00 AM
Secretary of State

DOCUMENT # F14636 1. Entity Name SPRAY MASTERS, INC.	
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Principal Place of Business 2762 NW 62 STR MIAMI, FL 33147-7662 US	Mailing Address 2762 NW 62 STR MIAMI, FL 33147-7662 US
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01162007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2229393	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALVAREZ, RAUL
 2766 NW 62ND STREET
 MIAMI, FL 33147

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000610204
 02/02/07-80012-010 150.00

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	GONZALEZ, JOSE
STREET ADDRESS	4237 S.W. 95 AVE.
CITY-ST-ZIP	MIAMI, FLORIDA 00000,
TITLE	VP
NAME	GONZALEZ, RAYMOND
STREET ADDRESS	2766 NW 62 ST
CITY-ST-ZIP	MIAMI, FL 33147
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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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Raymond Gonzalez* 1/17/07 3056349454
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #