

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000116918

FILED  
Feb 17, 2006  
Secretary of State

Entity Name: SARABIA'S CUSTOM STUCCO, INC.

## Current Principal Place of Business:

13255 CASA VERDE CIRCLE  
ASTATULA, FL 34705 US

## New Principal Place of Business:

## Current Mailing Address:

13255 CASA VERDE CIRCLE  
ASTATULA, FL 34705 US

## New Mailing Address:

FEI Number: 20-0313791      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KABA CONSULTING INC  
205 W WASHINGTON ST  
SUITE C  
MINNEOLA, FL 34755 US

## Name and Address of New Registered Agent:

KABA CONSULTING INC  
214 E WASHINGTON ST  
SUITE A  
MINNEOLA, FL 34715 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: ALEJANDRO KABA

02/17/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SARABIA, JOSE A  
Address: 13255 CASA VERDE CIRCLE  
City-St-Zip: ASTATULA, FL 34705

Title: SEC ( ) Delete  
Name: SARABIA, MARICELA  
Address: 13255 CASA VERDE CIRCLE  
City-St-Zip: ASTATULA, FL 34705 US

Title: D ( ) Delete  
Name: MANDUGANO, ISRAEL  
Address: 13255 CASA VERDE CIRCLE  
City-St-Zip: ASTATULA, FL 34705 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: PENA, CRENCIO  
Address: 13245 MASSACHUSETTS AVE  
City-St-Zip: ASTATULA, FL 34705 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSE A SARABIA

P

02/17/2006

Electronic Signature of Signing Officer or Director

Date