

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000116918

FILED
Mar 09, 2007
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:

13413 CASA VERDE CIRCLE
ASTATULA, FL 34705 US

Current Mailing Address:

13255 CASA VERDE CIRCLE
ASTATULA, FL 34705 US

New Mailing Address:

13413 CASA VERDE CIRCLE
ASTATULA, FL 34705 US

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
214 E WASHINGTON ST
SUITE A
MINNEOLA, FL 34715 US

Name and Address of New Registered Agent:

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: _____

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SARABIA, JOSE A
Address: 13413 CASA VERDE CIRCLE
City-St-Zip: ASTATULA, FL 34705

Title: SEC (X) Change () Addition
Name: SARABIA, MARICELA
Address: 13413 CASA VERDE CIRCLE
City-St-Zip: ASTATULA, FL 34705 US

Title: D (X) Change () Addition
Name: MIRAMONTES, JONAS
Address: 13413 CASA VERDE CIRCLE
City-St-Zip: ASTATULA, FL 34705 US

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

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

03/09/2007

Electronic Signature of Signing Officer or Director

_____ Date