

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000037636

1. Entity Name
SERPA PAINTING CORP.



Principal Place of Business

5556 W 24 WAY
HIALEAH, FL 33016

Mailing Address

5556 W 24 WAY
HIALEAH, FL 33016

FILED
08 SEP 29 PM 4:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



09242008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

| | |
|-----------------------------|---|
| 4. FEI Number 20-4511816 | Applied For <input type="checkbox"/> |
| | Not Applicable <input checked="" type="checkbox"/> |

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SERPA, HELIODORO
5556 W 24 WAY
HIALEAH, FL 33016

DO NOT WRITE IN THIS SPACE

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
Due by September 12, 2008**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

| | |
|----------------|-------------------|
| TITLE | P |
| NAME | SERPA, HELIODORO |
| STREET ADDRESS | 5556 W 24 WAY |
| CITY-ST-ZIP | HIALEAH, FL 33016 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
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| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

300136519523
10/01/08--01025--006 **150.00

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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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/10/08

Date

Daytime Phone #

9/29/08