

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000084249

FILED
Jan 30, 2007
Secretary of State

Entity Name: CHAMPION FRAMING CORPORATION

Current Principal Place of Business:

524 S. SEGRAVE STREET
1
DAYTONA BEACH, FL 32114

New Principal Place of Business:

Current Mailing Address:

PO BOX 9055
DAYTONA BEACH, FL 32120

New Mailing Address:

FEI Number: 20-5111350

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAYTONA SOLUTIONS! INC.
524 S. SEGRAVE STREET
2
DAYTONA BEACH, FL 32114 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: VP () Delete
Name: MARTINEZ, JUAN
Address: 1685 S. RIDGEWOOD AVE
City-St-Zip: DAYTONA BEACH, FL 32119

Title: SEC () Delete
Name: FUSTOS, GABOR
Address: 4900 DOLPHIN STREET
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: VP () Delete
Name: GYORKO, BELA
Address: 240 N OLEANDER AVE, #2
City-St-Zip: DAYTONA BEACH, FL 32114

Title: P () Delete
Name: PAJARO, CHRISTIAN
Address: 1625 ESPANOLA AVE
City-St-Zip: HOLLY HILL, FL 32117

Title: VP (X) Delete
Name: CABRERA, OSCAR
Address: 1930 S. RIDGEWOOD AVE,
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: VP () Delete
Name: CHAIREZ, JOAN
Address: 1685 S. RIDGEWOOD AVE, #225
City-St-Zip: SOUTH DAYTONA, FL 32119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CLAUDIA, SLY
Address: 524 S. SEGRAVE STREET, # 3
City-St-Zip: DAYTONA BEACH, FL 32114

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

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

Title: VP (X) Change () Addition
Name: PAJARO, CHRISTIAN
Address: 1625 ESPANOLA AVE
City-St-Zip: HOLLY HILL, FL 32117

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

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: CLAUDIA SLY

P

01/30/2007

Electronic Signature of Signing Officer or Director

Date