## SIGNATURE: WILLERSON VIEIRA

Electronic Signature of Signing Officer/Director Detail

# 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# P08000013260

Entity Name: WDC PAINTING AND BODY INC

#### **Current Principal Place of Business:**

11435 ROCKET BLVD. SUITE 102 ORLANDO, FL 32824

#### **Current Mailing Address:**

11435 ROCKET BLVD. SUITE 102 ORLANDO, FL 32824

### FEI Number: 26-1907256

#### Name and Address of Current Registered Agent:

WILLERSON, VIEIRA 11435 ROCKET BLVD SUITE 102 ORLANDO, FL 32824 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:

Electronic Signature of Registered Agent

### Officer/Director Detail :

| Oncer/Director Detail. |                         |                 |                    |
|------------------------|-------------------------|-----------------|--------------------|
| Title                  | Р                       | Title           | MANAGER            |
| Name                   | VIEIRA, WILLERSON S     | Name            | VIEIRA, CARLOS     |
| Address                | 14204 CRYSTAL KEY PLACE | Address         | 11435 ROCKET BLVD. |
| City-State-Zip:        | ORLANDO FL 32824        |                 | SUITE 102          |
|                        |                         | City-State-Zip: | ORLANDO FL 32824   |
| Title                  | SECRETARY               |                 |                    |
| Name                   | VIEIRA, DEIVERSON       |                 |                    |
| Address                | 11435 ROCKET BLVD.      |                 |                    |
|                        | SUITE 102               |                 |                    |
| City-State-Zip:        | ORLANDO FL 32824        |                 |                    |

I hereby 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 all other like empowered.

PRESIDENT

05/01/2017

FILED May 01, 2017 Secretary of State CC0534148354

Certificate of Status Desired: No

Date

Date