## **2007 FOR PROFIT CORPORATION ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

## DOCUMENT # K06284

1. Entity Name

STREET ADDRESS

CTTY-51-ZP TITLE NAME STREET ADDRESS

CTTY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZP

NAME STREET ADDRESS CITY-ST-ZIP भार ह NAME STREET ADDRESS CITY-ST-ZP

TITLE NAME

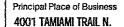
NAPLES PLASTERING, INC.

Mailing Address

Jan 09, 2007 08:00 AN Secretary of State

CR2E034 (11/05)

**FILED** 



#410

NAPLES, FL 34103 US

P.O. BOX 8211 NAPLES, FL 34101-8211 US



No Chg-P

01052007

			•	65-0124020	)		Not Applicable	
				5. Certificate of Sta	tus Desired		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent								
BORELLI, VINCENT G 1116 DORMIE DR NAPLES, FL 34108				DO NOT WRITE IN THIS SPACE				
	named entity submits this statement for the plicons of registered agent.  Signature, board or provide name of receivered scent and like		-	egistered agent, or both, in t	he State of Flo	rida. I a		
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financing     Trust Fund Contribution.		\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIRECTORS							
TITLE NAME	DPST BORELLI, VINCENT G							
STREET ADDRESS	4001 TAMIAMI TRAIL N. #410							
CITY-ST-ZP	NAPLES, FL							

DO NOT WRITE

IN THIS SPACE

U00000580024

01/10/07-80030-022 150.00

12. I hereby certify that the information supplied with this filling 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.

Daytime Phone #