

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000045973

FILED
Jul 08, 2004
Secretary of State

Entity Name: E.A.V.PAINTING SERVICES, LLC

Current Principal Place of Business:

921 ROMANO AVENUE
ORLANDO, FL 32807

New Principal Place of Business:

Current Mailing Address:

921 ROMANO AVENUE
ORLANDO, FL 32807

New Mailing Address:

FEI Number: 20-0406270

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VALIENTE, PATRICIA B
921 ROMANO AVENUE
ORLANDO, FL 32807 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

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: VALIENTE, PATRICIA B
Address: 921 ROMANO AVENUE
City-St-Zip: ORLANDO, FL 32807

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: VALIENTE, PATRICIA B
Address: 921 ROMANO AVENUE
City-St-Zip: ORLANDO, FL 32807 US

Title: MGRM () Change (X) Addition
Name: VALIENTE, ERICK A
Address: 921 ROMANO AVE
City-St-Zip: ORLANDO, FL 32807 US

Title: MGRM () Change (X) Addition
Name: TOLENTINO, FERNANDO
Address: 921 ROMANO AVE
City-St-Zip: ORLANDO, FL 32807 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PATRICIA B. VALIENTE

MRS.

07/08/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date