

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000058121

FILED
Mar 29, 2007
Secretary of State

Entity Name: HECTOR & MABEL PAINTING & CLEANING SERVICES LLC

Current Principal Place of Business:

3391 HICKORY HAMMOCK RD
JACKSONVILLE, FL 32226 US

New Principal Place of Business:

1444 SHIRE CT
JACKSONVILLE, FL 32218 US

Current Mailing Address:

3391 HICKORY HAMMOCK RD
JACKSONVILLE, FL 32226 US

New Mailing Address:

1444 SHIRE CT
JACKSONVILLE, FL 32218 US

FEI Number: 34-2008720

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSORIO, HECTOR
3391 HICKORY HAMMOCK RD
JACKSONVILLE, FL 32226 US

Name and Address of New Registered Agent:

OSORIO, HECTOR
1444 SHIRE CT
JACKSONVILLE, FL 32218 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: HECTOR OSORIO

03/29/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: OSORIO, HECTOR
Address: 3391 HICKORY HAMMOCK RD
City-St-Zip: JACKSONVILLE, FL 32226 US

Title: MGRM () Delete
Name: OSORIO, MABEL
Address: 3391 HICKORY HAMMOCK RD
City-St-Zip: JACKSONVILLE, FL 32226 US

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

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: OSORIO, HECTOR
Address: 1444 SHIRE CT
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: VP (X) Change () Addition
Name: OSORIO, MABEL
Address: 1444 SHIRE CT
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: MGM () Change (X) Addition
Name: GAITAN, OMAR
Address: 900 PLAZA DRIVE, APT 116
City-St-Zip: ATLANTIC BEACH, FL 32233

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 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: HECTOR OSORIO

PRES

03/29/2007

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