

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000011670

Entity Name: G.E. PAINTING LLC

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

2458 23RD STREET
SARASOTA, FL 34234

New Principal Place of Business:

Current Mailing Address:

2458 23RD STREET
SARASOTA, FL 34234

New Mailing Address:

FEI Number: 20-4229230

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PANDO, JULIO
2458 23RD STREET
SARASOTA, FL 34234 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/MANAGERS:

Title: MGRM () Delete
Name: PANDO, JULIO
Address: 2458 23RD STREET
City-St-Zip: SARASOTA, FL 34234

Title: MGRM () Delete
Name: MONTES, JOSE MANUEL
Address: 2458 23RD STREET
City-St-Zip: SARASOTA, FL 34234

Title: MGRM () Delete
Name: FUENTES, JOSE
Address: 2458 23RD STREET
City-St-Zip: SARASOTA, FL 34234

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: LAGUNEZ, NICOLAS
Address: 2458 23RD STREET
City-St-Zip: SARASOTA, FL 34234

Title: MGRM (X) Change () Addition
Name: ROMERO, EDWARD R
Address: 2458 23RD STREET
City-St-Zip: SARASOTA, FL 34234

I hereby certify that the information supplied with this filing does not qualify 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: JULIO PANDO

MGRM

04/27/2007

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