


FILED
Jun 18, 2007 8:00 am
Secretary of State

05-14-2007 90066 009 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P00000051156			
1. Entity Name J AND JL PAINTING, CORP.			
Principal Place of Business 5500 SW 77 CT 102 MIAMI, FL 33155		Mailing Address 5500 SW 77 CT 102 MIAMI, FL 33155	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address P.O. BOX 431282	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State SOUTH MIAMI, FL	
Zip	Country	Zip 33243	Country FL
4. FEI Number 65-1012087		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		04272007 Chg-P CR2E034 (12/06)	
6. Name and Address of Current Registered Agent HERNANDEZ, HENRY 5500 SW 77 CT 102 MIAMI, FL 33155		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ DATE _____ <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renouncing)</small>			
FILE NOW!! FEE IS \$150.00 After May 1, 2007, Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTS HERNANDEZ, HENRY 5500 SW 77 CT MIAMI, FL 33155 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exceptions 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.			
SIGNATURE: HENRY HERNANDEZ		04.27.07 (305) 226-3443	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	