## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P01000050769 FILED** Sep 09, 2008 08:00 AM Secretary of State L & R PAINTING & WATER PROOFING, INC. Principal Place of Business Mailing Address . 641 NW 198TH ST ---641 NW 198TH ST MIAMI, FL 33169 MIAMI, FL 33169 09032008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1108033 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent REID, LINDSAY DO NOT WRITE 641 NW 198TH ST MIAMI, FL 33169 IN THIS SPACE 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 Frorida. I am tamiliar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstalling) In accordance with s. 607.193(2)(b), F.S. the corporation did not receive the prior notice. 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 12, 2008 OFFICERS AND DIRECTORS 10. PD TITLE NAME REID, LINDSAY STREET ADDRESS 641 NW 198TH ST U00000959318 09/09/08-80007-004 150.00 CITY-ST-ZIP MIAMI, FL 33169 TITLE NAME REID, NORMA STREET ADDRESS 641 NW 198TH ST CITY-ST-ZIP MIAMI, FL 33169 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 807. 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:

STREET ADDRESS CITY-ST-ZIP

ATURE AND THE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

19/03/08

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