

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 28, 2003 8:00 am**  
**Secretary of State**

0116716 AV

DOCUMENT # P02000012211

1. Entity Name  
DELGADO'S PAINTING INC.



01-09-2003 90066 041 \*\*\*150.00  
07-28-2003 90142 004 \*\*\*550.00

Principal Place of Business  
15148 W COLONIAL DR #104  
WINTER GARDEN FL 34787

Mailing Address  
15148 W COLONIAL DR #104  
WINTER GARDEN FL 34787



2. Principal Place of Business  
1441 W Spring Ridge

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State  
Winter garden, FL

City & State

4. FEI Number  
30-002-8707

Applied For  
Not Applicable

Zip  
34787

Country  
Orange

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DELGADO, ALEJANDRO  
15148 W COLONIAL DR #104  
WINTER GARDEN FL 34787

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

(NOTE: Registered Agent signature required when reinstating)

7-22-03

DATE

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME DELGADO, ALEJANDRO  
STREET ADDRESS 15148 W COLONIAL DR #104  
CITY-ST-ZIP WINTER GARDEN FL 34787

☐ Delete

TITLE VD  
NAME Johnny A. Ortega  
STREET ADDRESS 1335 W pointe villas Apt # 202  
CITY-ST-ZIP Winter garden FL 34787

☐ Change

☒ Addition

TITLE VD  
NAME DELGADO, EFRAN  
STREET ADDRESS 15148 W COLONIAL DR #104  
CITY-ST-ZIP WINTER GARDEN FL 34787

☐ Delete

TITLE SE  
NAME Rafael Villareal Delgado  
STREET ADDRESS 1335 W. pointe villas Apt # 202  
CITY-ST-ZIP Winter garden FL 34787

☐ Change

☒ Addition

TITLE VD  
NAME DELGADO, JOSE A  
STREET ADDRESS 15148 W COLONIAL DR #104  
CITY-ST-ZIP WINTER GARDEN FL 34787

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)