## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

REAND TYPED OR PRINTED NAME OF SIGNING OFF

ER OR DIRECTOR

## **Secretary of State** DOCUMENT # P02000028479 01-18-2007 90116 018 \*\*\*158.75 1. Entity Name NEGRONS' WATERPROOFING AND PAINTING INC. Principal Place of Business Mailing Address 1245 FRASER PINE BLVD 3212 SOUTH GATE CIR 60003109 SARASOTA, FL 34240 SARASOTA, FL 34239 2. Principal Place of Business - No P.O. Box # 1245 Fraser Fine BIVD. 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01082007 Cha-P CR2E034 (12/06) Applied For City & State 4. FEL Number City & State arasota 74-3032097 Not Applicable Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NEGRON, STEVEN Street Address (P.O. Box Number is Not Acceptable) 1345 FRASER PINE BLVD SARASOTA, FL 34240 Zip Code City FL 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. ☐ Addition Change PVD TITLE TITLE Delete NEGRON, STEVEN NAME NAME 1245 Fraser Pine Blud. FRASER PINE BLVD 1345 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA, FL 34240 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NEGRON, ROBIN STREET ADDRESS 1245 Fraser Pine Blud. FRASER PINE BLVD 1345 STREET ADDRESS SARASOTA FL 34240 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Defete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing 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 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.

FILED

Jan 18, 2007 8:00 am

## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

## ATTACHMENT DOCUMENT # P02000028479 **NEGRONS' WATERPROOFING AND PAINTING INC.** COPY 60003109 Principal Place of Business Mailing Address 1345 FRASER PINE BLVD 3212 SOUTH GATE CIR SARASOTA, FL 34240 SARASOTA, FL 34239 2. Principal Place of Business - No P.O. Box # 1245 Fraser Fine DIVD. 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01082007 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For arusota 74-3032097 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent **NEGRON, STEVEN** 1345 FRASER PINE BLVD Street Address (P.O. Box Number is Not Acceptable) SARASOTA, FL 34240 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PVD TITLE Delete TITLE ☐ Change ☐ Addition NEGRON, STEVEN NAME NAME 1245 Fraser Pine Blud. STREET ADDRESS 1345 FRASER PINE BLVD STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34240 CITY-SI-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NEGRON, ROBIN NAME NAME 1245 Fraser Pine Blud. STREET ADDRESS 1345 FRASER PINE BLVD STREET ADDRESS CITY-SY-ZIP SARASOTA, FL 34240 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Dalete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. Thereby 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if SIGNATURE: Daytime Phone #