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

## May 07, 2007 08:00 A Secretary of State **DOCUMENT # P02000127625** POLLO'S FRAMING CORP Mailing Address Principal Place of Business 1109 PALM DRIVE 1109 PALM DRIVE IMMOKALEE, FL 34142 IMMOKALEE, FL 34142 05022007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1167237 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE VEGA, SERGIO 1109 PALM DRIVE IMMOKALEE, FL 34142 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 Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. (NOTE Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable \$5.00 May Be 9. Election Campaign Financing In accordance with s. 607.193(2)(b), F.S., the FILE NOW!!! FEE IS \$150.00 corporation did not receive the prior notice. Due by September 14, 2007 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE VEGA, SERGIO NAME 000000762928 05/29/07-80032-021 158.75 1109 PALM DRIVE STREET ADDRESS CITY-ST-ZIP IMMOKALEE, FL 34142 TITLE NAME STREET ADDRESS CITY -ST - ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CUTY - ST - ZIP IN THIS SPACE TITLE STREET ADDRESS CITY - ST - ZIP TITLE STREET ADDRESS CITY - ST - ZIP IIIE NAME

12. Thereby 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.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TIPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

**FILED**