

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000011489

FILED
May 28, 2009
Secretary of State

Entity Name: D.J.B PAINTING SOLUTIONS, CORP.

Current Principal Place of Business:

900 NE 125TH STREET
SUITE 204
NORTH MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

PO BOX 600116
NORTH MIAMI BEACH, FL 33160

New Mailing Address:

PO BOX 600462
NORTH MIAMI BEACH, FL 33160

FEI Number: 32-0057270

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, LUIS R
900 NE 125TH STREET
204
NORTH MIAMI, FL 33161 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GARCIA, LUIS R
Address: 900 NE 125TH STREET SUITE 204
City-St-Zip: NORTH MIAMI, FL 33161

Title: VD () Delete
Name: GARCIA, RAQUEL
Address: PO BOX 600462
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: SD () Delete
Name: GARCIA, RAQUEL
Address: PO BOX 600462
City-St-Zip: NORTH MIAMI BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAQUEL GARCIA

VP

05/28/2009

Electronic Signature of Signing Officer or Director

_____ Date