

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90276 048 ***150.00

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1. Entity Name

ALL IN ONE PAINTING & HOME REMODELING, CORP.



Principal Place of Business

1750 W 46TH ST
201
HIALEAH FL 33012

Mailing Address

1750 W 46TH ST
201
HIALEAH FL 33012



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/05)

4. FEI Number

56-2385550

Applied For

Not Applicable

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

MARTINEZ-PARERA, FRANCISCO
~~1825 W 44 PL #1206~~
~~HIALEAH FL 33012~~

Name

Street Address (P.O. Box Number is Not Acceptable)

1750 W 46TH ST. #201

City HIALEAH

FL

Zip Code 33012

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

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

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 DPT ☒ Delete
NAME NUNEZ, HORTENSIA J
STREET ADDRESS ~~1825 W 44 PL #1206~~
CITY-ST-ZIP HIALEAH FL 33012

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1750 W 46TH ST. #201
CITY-ST-ZIP HIALEAH, FL 33012

TITLE DVS ☒ Delete
NAME MARTINEZ-PARERA, FRANCISCO
STREET ADDRESS ~~1825 W 44 PL #1206~~
CITY-ST-ZIP HIALEAH FL 33012

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1750 W 46TH ST. #201
CITY-ST-ZIP HIALEAH, FL 33012

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

[Signature]

MARTINEZ-PARERA, FRANCISCO

(305) 962-3415