


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 27, 2007 08:00 A**  
**Secretary of State**

DOCUMENT # P03000112464  
1. Entity Name  
ROGER PAINTING CORPORATION



Principal Place of Business 5035 NW 193 TERR MIAMI, FL 33055	Mailing Address 5035 NW 193 TERR MIAMI, FL 33055
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**DO NOT WRITE IN THIS SPACE**



02232007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0295960	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
CANTO, ROGELIO ALFONSO  
5035 NW 196 TERR  
MIAMI, FL 33055

**DO NOT WRITE 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CANTO, ROGELIO ALFONSO 5035 NW 193 TERR MIAMI, FL 33055
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03/07/07-80064-015 150.00

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

SIGNATURE: ROGELIO CANTO A.  2/23/07 954)4453596  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #