

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000120185

Entity Name: REVEX PAINTING, INC

FILED
Feb 25, 2008
Secretary of State

Current Principal Place of Business:

3601 BAKER AVE
#101
HAINES CITY, FL 33844

New Principal Place of Business:

2630 E JOHNSON AVE
HAINES CITY, FL 33844

Current Mailing Address:

3601 BAKER AVE
#101
HAINES CITY, FL 33844

New Mailing Address:

2630 E JOHNSON AVE
HAINES CITY, FL 33844

FEI Number: 71-0957296

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISABEL, GIL M
3601 BAKER AVE
101
HAINES CITY, FL 33844 US

Name and Address of New Registered Agent:

GIL, ISABEL M
2630 E JOHNSON AVE
HAINES CITY, FL 33844 US

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: ISABEL M GIL

02/25/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ISABEL M, GIL
Address: 3601 BAKER AVE #101
City-St-Zip: HAINES CITY, FL 33844

Title: SEC () Delete
Name: CYNTHIA, BARAJAS
Address: 3601 BAKER AVE
City-St-Zip: HAINES CITY, FL 33844

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GIL, ISABEL M
Address: 2630 E JOHNSON AVENUE
City-St-Zip: HAINES CITY, FL 33844

Title: SEC (X) Change () Addition
Name: BARAJAS, CYNTHIA
Address: 2630 E JOHNSON AVE
City-St-Zip: HAINES CITY, FL 33844

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: ISABEL M GIL

P

02/25/2008

Electronic Signature of Signing Officer or Director

Date