

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 26, 2007 8:00 am
Secretary of State

06-26-2007 90001 007 ***550.00

DOCUMENT # P03000123703

1. Entity Name
SONNY'S PAINTING, INC.



Principal Place of Business
**1018 CLEARMONT STREET
SEBASTIAN, FL 32958**

Mailing Address
**P.O. BOX 650623
VERO BEACH, FL 32965**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

05222007

Chg-P

CR2E034 (12/06)

4. FEI Number

11-3707770

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PAYNE, AQUILA E
1018 CLEARMONT STREET
SEBASTIAN, FL 32958**

7. Name and Address of New Registered Agent

Name **SIRENA MIRANDA**

Street Address (P.O. Box Number is Not Acceptable)
1018 Clearmont St.

City **Sebastian**

FL 32958

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 the obligations of registered agent.

SIGNATURE

Sirena Miranda

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

5-22-07

**FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☒ Delete
NAME **PAYNE, AQUILA E**
STREET ADDRESS **1018 CLEARMONT STREET**
CITY-ST-ZIP **SEBASTIAN, FL 32958**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DI:

TITLE **P-T-D** ☐ ☒ Addition
NAME **SIRENA MIRANDA**
STREET ADDRESS **1018 Clearmont St.**
CITY-ST-ZIP **Sebastian FL 32958**

TITLE **VP-S-** ☐ Change ☒ Addition
NAME **DAVID EVANS**
STREET ADDRESS **1018 Clearmont St**
CITY-ST-ZIP **Sebastian FL 32958**

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

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

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

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 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

Sirena Miranda

Signature + typed name
Sirena Miranda

S89-1258
Daytime Ph #