

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

06 AUG 24 PM 4: 57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # P03000127443

1. Entity Name
A+ SEAMLESS GUTTERS INC.



Principal Place of Business

14911 SW 80 ST
217
MIAMI, FL 33193 US

Mailing Address

14911 SW 80 ST
217
MIAMI, FL 33193 US

2. Principal Place of Business

14867 SW 104th Street
Suite, Apt. #, etc.
14

3. Mailing Address

14867 SW 104th Street
Suite, Apt. #, etc.
14

08232006 Chg-P CR2E034 (11/05)

City & State

Miami Florida

City & State

Miami Florida

4. FEI Number

45-0526820

Applied For

Not Applicable

Zip

33196

Country

USA

Zip

33196

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BUENO, FRANCISCO
11470 SW 56 ST.
MIAMI, FL 33165

address Change
Only

7. Name and Address of New Registered Agent

Name

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

14867 SW 104th Street # 14

City Miami

FL

Zip Code 33196

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 reappointing)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

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

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME BUENO, FRANCISCO address Change
STREET ADDRESS 11470 SW 56 ST. Only
CITY-ST-ZIP MIAMI, FL 33165

TITLE V ☐ Delete
NAME CASTRO, CASANDRA address Change
STREET ADDRESS 14911 SW 80 ST. Only
CITY-ST-ZIP MIAMI, FL 33193

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
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 DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 14867 SW 104th Street # 14
CITY-ST-ZIP Miami FL 33196

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 14867 SW 104th Street # 14
CITY-ST-ZIP Miami FL 33196

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 100079219261
CITY-ST-ZIP 08/29/06--01033--002 **150.00

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:

[Signature]

08-23-2006

305-2714257

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #