

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000132179

FILED
May 01, 2009
Secretary of State

Entity Name: OCTAVIO CASTILLO PAINTING INC.

Current Principal Place of Business:

1329 VIC KAY CT
WINTER GARDEN, FL 34787

New Principal Place of Business:

259 DANIELS POINT DR
WINTER GARDEN, FL 34787

Current Mailing Address:

1329 VIC KAY CT
WINTER GARDEN, FL 34787

New Mailing Address:

259 DANIELS POINT DR
WINTER GARDEN, FL 34787

FEI Number: 20-0389546

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KABA CONSULTING INC
214 E WASHINGTON ST
SUITE A
MINNEOLA, FL 34715 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

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

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CASTILLO, OCTAVIO
Address: 1329 VIC KAY CT
City-St-Zip: WINTER GARDEN, FL 34787

Title: DIR () Delete
Name: RUELAS, CRISTIAN A
Address: 1329 VIC KAY CT
City-St-Zip: WINTER GARDEN, FL 34787

Title: DIR () Delete
Name: ARRATIA, ISRAEL
Address: 1329 VIC KAY CT
City-St-Zip: WINTER GARDEN, FL 34787

Title: SEC () Delete
Name: CASTILLO, SUSANA
Address: 1329 VIC KAY CT
City-St-Zip: WINTER GARDEN, FL 34787 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: OCTAVIO CASTILLO

P

05/01/2009

Electronic Signature of Signing Officer or Director

_____ Date