## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000136145

Entity Name: S&PRENTAL&REALTY, INC.

**FILED** Sep 23, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1432 W. BRANCH ST. LANTANA, FL 33462

**Current Mailing Address: New Mailing Address:** 

7710 BLAIRWOOD CIR SO 7710 BLAIRWOOD CIR SO LAKE WORTH, FL 33467 LAKE WORTH, FL 33467 US

FEI Number: 43-2035266 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FABIAN, GUILLERMO FABIAN, GUILLERMO 5453 GARDEN HILLS CIRCLE 9124 DELNO ST. WEST PALM BEACH, FL 33415 US #8702 NAPLES, FL 34113 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: GUILLERMO FABIAN 09/23/2008 Date

Electronic Signature of Registered Agent

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition FABIAN, GUILLERMO FABIAN, GUILLERMO Name: Name: 5453 GARDEN HILLS CIRCLE 9124 DELNO ST. #8702 Address: Address: City-St-Zip: WEST PALM BEACH, FL 33415 US City-St-Zip: NAPLES, FL 34113 US

Title: Title: DP (X) Change ( ) Addition () Delete

Name: CARLOW, SHAWN Name: CARLOW, SHAWN 1432 W. BRANCH ST Address: 1432 W. BRANCH ST. Address: LANTANA, FL 33462 US LANTANA, FL 33462 US City-St-Zip: 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: SHAWN CARLOW PD 09/23/2008