## 2006 FOR PROFIT CORPORATION

## **ANNUAL REPORT** FILED Apr 14, 2006 08:00 AM Secretary of State DOCUMENT # P03000139220 1. Entity Name J.M.Ś. CARPENTRY, INC. Principal Place of Business Mailing Address 14036 AMES AVE. 14036 AMES AVE. US ORLANDO, FL 32826 ORLANDO, FL 32826 04112006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Numbe 90-0126506 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent SANDOVAL, JESUS DO NOT WRITE 14036 AMES AVE. ORLANDO, FL 32826 IN THIS SPACE 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 famillar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or minted name of registered agent and title if explicable DATE (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWII FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE SANDOVAL, JESUS NAME 14036 AMES AVE. STREET ADDRESS CUTY-ST-ZIP ORLANDO, FL 32826 TITLE U00000508042 PARTIDA, JOSE G NAME STREET ADDRESS 14036 AMES AVE.

04/27/06-80087-012 158.75

Applied For

Not Applicat

\$8.75 Additional

Fee Required

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling 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 it changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

313) F NAME STREET ADDRESS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-7IP

ORLANDO, FL 32826

OR DIRECTOR