

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000142369

FILED
Mar 29, 2005
Secretary of State**Entity Name:** S & G PROFESSIONAL PAINTING INC.**Current Principal Place of Business:**6279 WHISPERING WAY
ORLANDO, FL 32807 US**New Principal Place of Business:****Current Mailing Address:**6279 WHISPERING WAY
ORLANDO, FL 32807 US**New Mailing Address:****FEI Number:** 38-3714363**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SOLANO, SANTIAGO L
6279 WHISPERING WAY
ORLANDO, FL 32807 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**OFFICERS AND DIRECTORS:****Title:** P () Delete
Name: SOLANO, SANTIAGO L
Address: 6279 WHISPERING WAY
City-St-Zip: ORLANDO, FL 32807 US**Title:** VP () Delete
Name: GONZALEZ, ROSA A
Address: 3063 RIVERBROOK DR.
City-St-Zip: WINTER PARK, FL 32792 US**Title:** S () Delete
Name: CORA, JIZELLE
Address: 6279 WHISPERING WAY
City-St-Zip: ORLANDO, FL 32807 US**Title:** T () Delete
Name: SOLANO, CARMEN M
Address: 6279 WHISPERING WAY
City-St-Zip: ORLANDO, FL 32807 US**Title:** C () Delete
Name: GONZALEZ, FERNANDO
Address: 6279 WHISPERING WAY
City-St-Zip: ORLANDO, FL 32807 US**Title:** C () Delete
Name: ARROYO, SARAI
Address: 3063 RIVERBROOK DR.
City-St-Zip: WINTER PARK, FL 32792 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VP (X) Change () Addition
Name: SOLANO, FELIX J
Address: 6277 WHISPERING WAY
City-St-Zip: ORLANDO, FL 32807 US**Title:** S (X) Change () Addition
Name: SOLANO, CARMEN M
Address: 6279 WHISPERING WAY
City-St-Zip: ORLANDO, FL 32807 US**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** C (X) Change () Addition
Name: NIEVES, ERIC
Address: 6277 WHISPERING WAY
City-St-Zip: ORLANDO, FL 32807**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SANTIAGO L SOLANO

P

03/29/2005

Electronic Signature of Signing Officer or Director_____
Date