

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000014182

FILED
Jul 21, 2006
Secretary of State

Entity Name: SENOR LOPEZ PAINTING SVCES INC.

Current Principal Place of Business:

17523 78TH RD NORTH
LOXAHATCHEE, FL 33470

New Principal Place of Business:

1593 BAYRIDGE PLACE
WELLINGTON, FL 33414

Current Mailing Address:

1495 FOREST HILL BLVD
STE B
WEST PALM BEACH, FL 33406

New Mailing Address:

FEI Number: 20-0651201 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CR COOPER, CPA, PA
1495 FOREST HILL BLVD
STE B
WEST PALM BEACH, FL 33406 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: PSD () Delete
Name: LOPEZ, WALTER
Address: 17523 78TH RD NORTH
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: LOPEZ, WALTER A
Address: 1593 BAYRIDGE PLACE
City-St-Zip: WELLINGTON, FL 33414

I hereby certify that the information supplied with this filing does not qualify for the 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: WALTER A LOPEZ

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07/21/2006

Electronic Signature of Signing Officer or Director

_____ Date