## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000015753

Entity Name: THE BEST PLASTERING & STUCCO INC

FILED Jun 19, 2007 Secretary of State

| Current P   | rincipal Plac                                     | e of Business:   | New Principal Place of                      | New Principal Place of Business:             |  |
|---|---|--|---|--|--|
| 2621 OCIL<br>ORLANDO  | LA CT<br>), FL 32839                              | US   |   |  |  |
| Current Mailing Address:  |   |  | New Mailing Address                         | New Mailing Address:                         |  |
| 2621 OCIL<br>ORLANDO  | LA CT<br>), FL 32839                              | US   |   |  |  |
| FEI Number:   | 20-0645209  | 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: |   |  |   |  |  |
| The above   | LÁ CT<br>), FL 32839                              | US submits this statement for the                                    | purpose of changing its registered          | office or registered agent, or both,         |  |
| SIGNATUR  |   |  |   |  |  |
|   | Electro   | nic Signature of Registered A  | gent  | Date   |  |
|   |   | 93(2)(b), F.S., the corporation did ing Trust Fund Contribution ( ). | not receive the prior notice.               |  |  |
| OFFICERS AND DIRECTORS:   |   |  | ADDITIONS/CHANGE                            | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | P (<br>MONTILUS, IS<br>2621 OCILLA<br>ORLANDO, FL | СТ   | Title:<br>Name:<br>Address:<br>City-St-Zip: | ()Change ()Addition                          |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | VP (<br>AUGUSTE, AD<br>2621 OCILLA<br>ORLANDO, FL | ст   | Title:<br>Name:<br>Address:<br>City-St-Zip: | ()Change ()Addition                          |  |

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: ISAC MONTILUS P 06/19/2007