

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000026788

1. Entity Name
MONTENEGRO PLASTERING, INC.



FILED
May 10, 2005 8:00 am
Secretary of State

04-15-2005 90069 037 ***150.00

66016301



03012005 Chg-P CR2E034 (10/03)

Principal Place of Business
5729 ESTANCIA DRIVE
SUITE #1231
ORLANDO, FL 32822 US

Mailing Address
5729 ESTANCIA DRIVE
SUITE #1231
ORLANDO, FL 32822 US

*204 Fort Smith Blvd
Deltona, FL 32738*

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 20-0744146	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
MARTINEZ, CARLA E 5729 ESTANCIA DRIVE SUITE #1231 ORLANDO, FL 32822		Martinez, Carla E 204 Fort Smith Blvd Deltona, FL 32738	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	
FL		Zip Code	

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 familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent's signature required when resigning) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MARTINEZ, CARLA E 5729 ESTANCIA DRIVE APT #1231 ORLANDO, FL 32822 ☐ Delete	TITLE NEW NAME STREET ADDRESS CITY-ST-ZIP	P Martinez, Carla E 204 Fort Smith Blvd Deltona, FL 32738 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MONTENEGRO, JAVIER E 5729 ESTANCIA DRIVE APT #1231 ORLANDO, FL 32822 ☐ Delete	TITLE NEW NAME STREET ADDRESS CITY-ST-ZIP	VP Montenegro, Javier E 204 Fort Smith Blvd Deltona, FL 32738 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Carla E. Martinez* 5/6/05 (407) 321-6024
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Carla E. Martinez

(cell) 321-263-6267