

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000030814

Entity Name: PALAFOX BRO'S INC

FILED
Apr 02, 2007
Secretary of State

Current Principal Place of Business:

1351 U.S. HWY 92 EAST
DOVER, FL 33527 US

Current Mailing Address:

1351 U.S. HWY 92 EAST
DOVER, FL 33527 US

New Principal Place of Business:

6835 48TH AVE NORTH
APT 2
ST. PETERSBURG, FL 33709 US

New Mailing Address:

6835 48TH AVE NORTH
ST. PETERSBURG, FL 33709 US

FEI Number: 20-0783567

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PALAFOX, GERMAN
14644 MLK BLVD
DOVER, FL 33527 US

Name and Address of New Registered Agent:

TREJO, LUIS A
1106 N. PARSONS AVE
SUITE 102
BRANDON, FL 33510 US

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: LUIS A. TREJO

04/02/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PALAFOX, SESAR
Address: 6815 48TH AVE N APT 1
City-St-Zip: ST. PETERSBURG, FL 33709 US

Title: S () Delete
Name: BOCANEGRA, JOSE
Address: 6815 48TH AVE N APT 1
City-St-Zip: ST. PETERSBURG, FL 33709 US

Title: VP () Delete
Name: PALAFOX, MARTIN
Address: 6815 48TH AVE N APT 1
City-St-Zip: ST. PETERSBURG, FL 33709 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PALAFOX, SESAR
Address: 6835 48TH AVE N APT 2
City-St-Zip: ST. PETERSBURG, FL 33709 US

Title: S (X) Change () Addition
Name: BOCANEGRA, JOSE
Address: 6835 48TH AVE N APT 2
City-St-Zip: ST. PETERSBURG, FL 33709 US

Title: VP (X) Change () Addition
Name: PALAFOX, MARTIN
Address: 6835 48TH AVE N APT 2
City-St-Zip: ST. PETERSBURG, FL 33709 US

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: SESAR PALAFOX

P

04/02/2007

Electronic Signature of Signing Officer or Director

Date