## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000049084

Entity Name: AMERICAN CHOICE PAINTERS OF CENTRAL FLORIDA INC

**FILED** Apr 29, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

32 N. KIRKMAN RD. #2 8879 W. COLONIAL DR. #105

ORLANDO, FL 32811 OCOEE, FL 34761

**Current Mailing Address: New Mailing Address:** 

4210 MIDDLEBROOK RD. #633 5961 STRADA CAPRI WAY ORLANDO, FL 32811 ORLANDO, FL 32835

FEI Number: 01-0789070 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:

MEDEIROS, P HARRICHARAN, SHAMINA 4210 MIDDLEBROOK RD. #633 5961 STRADA CAPRI WAY ORLANDO, FL 32835 ORLANDO, FL 32811

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: SHAMINA HARRICHARAN 04/29/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: (X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete RUFINO, WOSLEY RUFINO, WOSLEY Name: Name: 4210 MIDDLEBROOK RD. #633 Address: 5961 STRADA CAPRI WAY Address: City-St-Zip: ORLANDO, FL 32811 City-St-Zip: ORLANDO, FL 32835

Title: Title: (X) Change ( ) Addition () Delete

Name: MEDEIROS, P Name: HARRICHARAN, SHAMINA 4210 MIDDLEBROOK RD. #633 Address: 5961 STRADA CAPRI WAY Address: ORLANDO, FL 32811 ORLANDO, FL 32835 City-St-Zip: City-St-Zip:

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.

VΡ SIGNATURE: SHAMINA HARRICHARAN 04/29/2007