

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000049592

FILED  
Mar 13, 2007  
Secretary of State

Entity Name: BATHTUB REFINISHING SERVICE INC.

## Current Principal Place of Business:

19499 N.E. 10 AVE APT #402  
NORTH MIAMI, FL 33179

## New Principal Place of Business:

721 - 82 ST  
2  
NORTH MIAMI BEACH, FL 33141

## Current Mailing Address:

19499 N.E. 10 AVE APT #402  
NORTH MIAMI, FL 33179

## New Mailing Address:

721 - 82 ST  
2  
NORTH MIAMI, FL 33141

FEI Number: 65-1221417

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHRADER, EVERARDO  
19499 N.E. 10 AVE APT #402  
NORTH MIAMI, FL 33179 US

## Name and Address of New Registered Agent:

SCHRADER, EVERARDO  
721 - 82 ST APT 2  
NORTH MIAMI BEACH, FL 33141 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:

03/13/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SCHRADER, EVERARDO  
Address: 19499 N.E. 10 AVE APT #402  
City-St-Zip: NORTH MIAMI, FL 33179

Title: VPT (X) Delete  
Name: ALVIZURI, JOSE  
Address: 19499 N.E. 10 AVE APT #402  
City-St-Zip: NORTH MIAMI, FL 33179

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SCHRADER, EVERARDO  
Address: 721 - 82 ST APT. 2  
City-St-Zip: NORTH MIAMI BEACH, FL 33141 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: EVERARDO M SCHRADER

P

03/13/2007

Electronic Signature of Signing Officer or Director

Date