## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with

SIGNATURE:

## Apr 17, 2006 8:00 am Secretary of State DOCUMENT # P04000053432 04-17-2006 90362 004 \*\*\*150.00 CATRACHO'S PAINTING SERVICES INC. Principal Place of Business Mailing Address 40000-13452 SOUTHWEST 278 TERRACE 156 N. SW 300 ST PRINCETON, FL 33032 HOMESTEAD, FL 33033 2. Principal Place of Business 3. Mailing Address 3951 NE SAULE Suite, Apt. #, etc. Suite, Apt. #, etc. 04102006 Chg-P CR2E034 (11/05) City & State 4. FEI Number Applied For 20-2247566 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name 6. JOKGE G VELASQUEX, 13452 SOUTH EST 278 TERRACE Street Ad-PRINCETON FL 33032 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change ☐ Addition , JOAGE NAME VELASQUEZ, JORGE G NAME VELA ZODEZ STREET ADDRESS 13452 SOUTHWEST 278 TERRACE STREET ADDRESS CITY-ST-ZIP PRINCETON, FL 33032 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME VELASQUEZ, SANTOS NAME STREET ADDRESS 13452 SOUTHWEST 278 TERRACE STREET ADDRESS CITY-ST-ZIP PRINCETON, FL 33032 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition VILLAVICENCIO, RAFAEL NAME NAME STREET ADDRESS 13452 SOUTHWEST 278 TERRACE STREET ADDRESS CITY-ST-ZIP PRINCETON, FL 33032 CITY-ST-ZIP TITLE SECRETALY ☐ Delete TITLE Addition VELAZOXEZ, LORGDA Y NAME NAME STREET ADDRESS 1310 DR. STREET ADORESS 3951 NE CITY-ST-ZIF CITY-ST-ZIP tonestead TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITI F ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental abort 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 troster empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

WED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED