
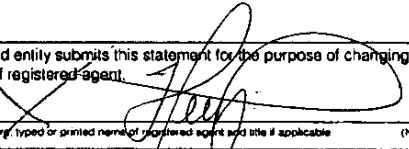
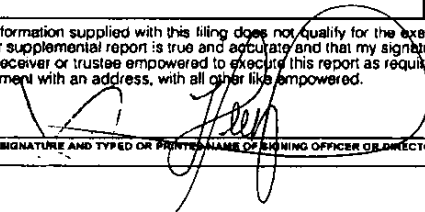


FILED
Jun 05, 2007 8:00 am
Secretary of State

05-04-2007 90081 039 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000054180 1. Entity Name H & A PAINTING 76, INC		
Principal Place of Business 9188 W. ATLANTIC BLVD 1577 CORAL SPRINGS, FL 33071 US	Mailing Address 9188 W. ATLANTIC BLVD 1577 CORAL SPRINGS, FL 33071 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent MARQUEZ, HERNAN 9188 W. ATLANTIC BLVD #1517 CORAL SPRINGS, FL 33071		DO NOT WRITE IN THIS SPACE
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 signature required when reinstating) 05/29/07		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HERNAN, MARQUEZ 9188 W. ATLANTIC BLVD #1517 CORAL SPRINGS, FL 33071	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS 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 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:  05/29/2007 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #		

66017953



04032007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0928520	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

954 478 8809