

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000062219

FILED
Apr 15, 2009
Secretary of State

Entity Name: JOAO PAULO FERNANDES GONCALVES INC

Current Principal Place of Business:

19638 COLORADO CIRCLE
BOCA RATON, FL 33432 US

New Principal Place of Business:

11042 SEAPORT LANE
BOCA RATON, FL 33428 US

Current Mailing Address:

19638 COLORADO CIRCLE
BOCA RATON, FL 33432 US

New Mailing Address:

11042 SEAPORT LANE
BOCA RATON, FL 33428 US

FEI Number: 20-1002111

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONCALVES, JOAO PAULO F
19638 COLORADO CIRCLE
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

GONCALVES, JOAO PAULO F
11042 SEAPORT LANE
BOCA RATON, FL 33428 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: JOAO PAULO GONCALVES

04/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: GONCALVES, JOAO PAULO F
Address: 19638 COLORADO CIRCLE
City-St-Zip: BOCA RATON, FL 33432 US

Title: VPT (X) Delete
Name: SARTORI, PRISCILA
Address: 19638 COLORADO CIRCLE
City-St-Zip: BOCA RATON, FL 33432 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: GONCALVES, JOAO PAULO F
Address: 11042 SEAPORT LANE
City-St-Zip: BOCA RATON, FL 33428 US

Title: () Change () Addition
Name:
Address:
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.

SIGNATURE: JOAO PAULO GONCALVES

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04/15/2009

Electronic Signature of Signing Officer or Director

Date