## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000070662

Entity Name: MEDINA'S DECKING SVCS INC

SORRENTO, FL 32776 US

City-St-Zip:

FILED Apr 20, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 30918 WESTWARD HO AVE SORRENTO, FL 32776 US **Current Mailing Address: New Mailing Address:** 30918 WESTWARD HO AVE SORRENTO, FL 32776 FEI Number: 20-1106296 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: MAYORGA, AUGUST C MAYORGA, AUGUST C 200 NORTH DENNING DRIVE 243 W KENNEDY BLVD SUITE 5 SUITE C WINTER PARK, FL 327893736 US ORLANDO, FL 32810 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: 04/20/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition MEDINA, SALVADOR Name: Name: 30918 WESTWARD HO AVE Address: Address: City-St-Zip: SORRENTO, FL 32776 US City-St-Zip: Title: VΡ () Delete Title: () Change () Addition Name: CHAVEZ, ISMAEL Name: 30918 WESTWARD HO AVE Address: 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: SALVADOR MEDINA P 04/20/2007