2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000082432

Entity Name: DELGADO'S PAINTING III, INC

FILED Mar 04, 2008 Secretary of State

•		· · · · · · · · · · · · · · · · · ·				
Current Principal Place of Business:				New Principal Place of Business:		
1550 DOWNINGS STREET GROVELAND, FL 34736				1441 W SPRING RIDGE CIR WINTER GARDEN, FL 34787		
Current Mailing Address:				New Mailing Address:		
1550 DOWNINGS STREET GROVELAND, FL 34736				1441 W SPRING RIDGE CIR WINTER GARDEN, FL 34787		
FEI Number:	: 20-1156370	FEI Number Applied For()	FEI Num	nber Not Appli	cable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
1441 WES), ALEJANDRC ST SPRING RID GARDEN, FL 3	GE CIRCLE				
	named entity see of Florida.	ubmits this statement for the p	urpose of	f changing it	s registere	d office or registered agent, or both,
SIGNATU	RE:					
Electronic Signature of Registered Agent				Date		
Election Car	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () DELGADO, JOS 1550 DOWNING GROVELAND, F	S STREET		Title: Name: Address: City-St-Zip:		(X) Change () Addition SPRIELLA NG RIDGE CIRCLE ARDEN, FL 34787
Title: Name: Address: City-St-Zip:	VP () VILLARREAL, R 890 MARLENE OCOEE, FL 34	DRIVE		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	DELGADO, COR	G RIDGE CIRCLE		Title: Name: Address: City-St-Zip:	1441 W. SF	(X) Change () Addition CORNELIO R PRING RIDGE CIRCLE ARDEN, FL 34787

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: ARELIS ESPRIELLA PD 03/04/2008