

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000095643

FILED  
May 05, 2008  
Secretary of State

Entity Name: FLORIDA PARKING LOT MAINTENANCE INC.

## Current Principal Place of Business:

412 N. PINE HILLS RD.  
SUITE AG  
ORLANDO, FL 32811

## New Principal Place of Business:

## Current Mailing Address:

101 HIDDEN SPRINGS CIRCLE  
KISSIMMEE, FL 34743

## New Mailing Address:

FEI Number: 20-1278447

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AGUIRRESAENZ, MIAMOR M  
101 HIDDEN SPRINGS CIRCLE  
KISSIMMEE, FL 34743 US

## Name and Address of New Registered Agent:

TREVINO, SILVANITA M  
144 N LANCELOT AVE  
ORLANDO, FL 32835 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: SILVANITA TREVINO

05/05/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: AGUIRRESAENZ, MIAMOR M  
Address: 101 HIDDEN SPRINGS CIRCLE  
City-St-Zip: KISSIMMEE, FL 34743

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: TREVINO, SILVANITA  
Address: 144 N LANCELOT AVE  
City-St-Zip: ORLANDO, FL 32835

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: SILVANITA TREVINO

VP

05/05/2008

Electronic Signature of Signing Officer or Director

Date