

# **2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P04000114935

**FILED**  
**Aug 20, 2008**  
**Secretary of State**

**Entity Name:** WEST COAST FLORIDA PAINTING, INC.

**Current Principal Place of Business:**

724 RUE LABEAU CIRCLE  
FORT MYERS, FL 33913 US

**New Principal Place of Business:**

**Current Mailing Address:**

724 RUE LABEAU CIRCLE  
FORT MYERS, FL 33913 US

**New Mailing Address:**

**FEI Number:** 77-0643172      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CHACON, RICARDO A  
724 RUE LABEAU CIR.  
FORT MYERS, FL 33913 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CHACON, RICARDO A  
Address: 724 RUE LABEAU CIR.  
City-St-Zip: FORT MYERS, FL 33913

Title: VP ( ) Delete  
Name: ARIAS-MENDOZA, ADRIANA  
Address: 724 RUE LABEAU CIR.  
City-St-Zip: FORT MYERS, FL 33913

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VP (X) Change ( ) Addition  
Name: CHACON, ADRIANA  
Address: 724 RUE LABEAU CIR.  
City-St-Zip: FORT MYERS, FL 33913

Title: SE ( ) Change (X) Addition  
Name: DOMINGUEZ, GUILLERMO C  
Address: 9850 BERNWOOD DRIVE PL #311  
City-St-Zip: FORT MYERS, FL 33966

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:** RICARDO A CHACON

P

08/20/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date