

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000115539

FILED
Jan 03, 2007
Secretary of State

Entity Name: HECTOR FRAMING GALLERY INC.

Current Principal Place of Business:

702 W. UNIVERSITY AVENUE
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

702 W. UNIVERSITY AVENUE
GAINESVILLE, FL 32601

New Mailing Address:

FEI Number: 04-3796483

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUIG, HECTOR G
5926 NW 37TH TERRACE
GAINESVILLE, FL 32653 US

Name and Address of New Registered Agent:

PUIG, HECTOR G
15314 NW 89TH STREET
ALACHUA, FL 32615 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: HECTOR G PUIG

01/03/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PUIG, HECTOR G
Address: 5926 NW 37TH TERRACE
City-St-Zip: GAINESVILLE, FL 32653

Title: VP () Delete
Name: ZHANG, YI
Address: 5926 NW 37TH TERRACE
City-St-Zip: GAINESVILLE, FL 32653

Title: S () Delete
Name: SAMPLE, PATRICIA M
Address: 3616 NW 186TH STREET
City-St-Zip: NEWBERRY, FL 32669

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PUIG, HECTOR G
Address: 15314 NW 89TH STREET
City-St-Zip: ALACHUA, FL 32615

Title: VP (X) Change () Addition
Name: ZHANG, YI
Address: 15314 NW 89TH STREET
City-St-Zip: ALACHUA, FL 32615

Title: () Change () Addition
Name:
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: HECTOR G PUIG

P

01/03/2007

Electronic Signature of Signing Officer or Director

Date