2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2008
Secretary of State

DOCUMENT# P04000118706

Entity Name: ALL PRO PAINT & WALLCOVERING, INC.

Current Principal Place of Business:

4127 RUBY DRIVE EAST
JACKSONVILLE, FL 32246

New Principal Place of Business:

12286 SCOTTS COVE TRAIL
JACKSONVILLE, FL 32225

Current Mailing Address:

4127 RUBY DRIVE EAST
JACKSONVILLE, FL 32246

New Mailing Address:

12286 SCOTTS COVE TRAIL
JACKSONVILLE, FL 32225

FEI Number: 73-1715481 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOATRIGHT, AGHAVNI I
4127 RUBY DRIVE EAST
JACKSONVILLE, FL 32246 US

Name and Address of New Registered Agent:

BOATRIGHT, AGHAVNI I
12286 SCOTTS COVE TRAIL
JACKSONVILLE, FL 32225 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: AGHAVNI I BOATRIGHT 02/26/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete
Name: BOATRIGHT, AGHAVNI I
Address: 4127 RUBY DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32246

Title: VD ( ) Delete
Name: BOATRIGHT, MARK J
Address: 4127 RUBY DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32246

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition
Name: BOATRIGHT, AGHAVNI I
Address: 12286 SCOTTS COVE TRAIL
City-St-Zip: JACKSONVILLE, FL 32225

Title: VD (X) Change ( ) Addition
Name: BOATRIGHT, MARK J
Address: 12286 SCOTTS COVE TRAIL
City-St-Zip: JACKSONVILLE, FL 32225

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: AGHAVNI I BOATRIGHT PSD 02/26/2008
Electronic Signature of Signing Officer or Director Date