2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P04000129355

1. Entity Name

MORALES MANRIQUE REMODELING INC



FILED
May 09, 2007 08:00 A
Secretary of State

Principal Place of Business

Mailing Address

1826 SHADYHILL TERRACE WINTER PARK, FL 32792

1826 SHADYHILL TERRACE WINTER PARK, FL 32792



DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) 05062007 No Chg-P

4. FEI Number Applied I-cr 20-1627908 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MANRIQUE, CARMEN 1826 SHADYHILL TERRACE WINTER PARK, FL 32792

DO NOT WRITE IN THIS SPACE

8. 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, Lam familiar with, and accept the obligations of registered agent. Signature: Typed or printed name a register of agent and they epiticable. (NOTE: Registered Agent signature reculted when relectating) CATE							
FILE NOWIII FEE IS \$150.00 Due by September 14, 2007 9. Election Campaign Financing \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., to corporation did not receive the prior notice.							
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE P MORALES, ALBERTO E 1826 SHADYHILL TERRACE WINTER PARK, FL 32792 VP MANRIQUE, CARMEN 1826 SHADYHILL TERRACE WINTER PARK, FL 32792	CTORS					
THLE NAME STREET ADDRESS CITY-ST-ZIP HILE HAME STREET ADDRESS CITY-ST-ZIP	S MORALES, DIEGO A 1826 SHADYHILL TERRACE WINTER PARK, FL 32792 T MORALES, JUAN P 1826 SHADYHILL TERRACE WINTER PARK, FL 32792			_ -	NOT WRITE THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TYLE NAME							
STREET AUURESS CITY-ST-ZIP 12. I hereby condicated	certify that the information supplied with this f	illing does not qualify for the exe	mptions con	stained in Chapter 119), Florida Statutes. I further certify that the information		

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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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SIGNATURE AND TYPED OR PRINTED NAME SIGNING OFFICER OR DIRECTOR