2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000129355

MORALES, JUÁN P

1826 SHADYHILL TERRACE

WINTER PARK, FL 32792

Name:

Address:

City-St-Zip:

FILED Jan 16, 2009 Secretary of State

Entity Name: MORALES MANRIQUE REMODELING INC							
Current Principal Place of Business:			New Prin	New Principal Place of Business:			
	DYHILL TERR PARK, FL 3279						
Current Mailing Address:			New Mail	New Mailing Address:			
	DYHILL TERR PARK, FL 3279						
FEI Number:	: 20-1627908	FEI Number Applied For ()	FEI Number Not App	olicable ()	Certificate of Status Desire	ed ()	
Name and	Address of C	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
1826 SHAI	E, CARMEN DYHILL TERR PARK, FL 3279		813 DELT BOX 1349	ALL FLORIDA FIRM, INC 813 DELTONA BLVD STE A BOX 1349726 DELTONA, FL 32725 US			
	named entity : e of Florida.	submits this statement for the p	ourpose of changing	its registered offi	ce or registered agent,	or both,	
SIGNATUR	RE: CHRISTII	NA CLARK FOR ALL FLORIDA	A FIRM, INC	NC 01/16/2009			
	Electror	nic Signature of Registered Age	ent		Date		
Election Car	mpaign Financin	g Trust Fund Contribution ().					
OFFICERS	S AND DIREC	TORS:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () MORALES, ALI 1826 SHADYHI WINTER PARK	LL TERRACE	Title: Name: Address: City-St-Zip:	()C	Change () Addition		
Title: Name: Address: City-St-Zip:	VP () MANRIQUE, CA 1826 SHADYHI WINTER PARK	LL TERRACE	Title: Name: Address: City-St-Zip:	()C	Change () Addition		
Title: Name: Address: City-St-Zip:	S () MORALES, DIE 1826 SHADYHI WINTER PARK	LL TERRACE	Title: Name: Address: City-St-Zip:	() C	Change () Addition		
Title:	Т () Delete	Title:	() C	Change () Addition		

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.

Name:

Address:

City-St-Zip:

SIGNATURE: CHRISTINA CLARK FOR ALBERTO MORALES Ρ