

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000002603

Entity Name: KV'S PAINTING INC

FILED
Feb 08, 2006
Secretary of State

Current Principal Place of Business:

205 WILLOW BEND DR
CLERMONT, FL 34711 US

New Principal Place of Business:

2430 HOLLY RIDGE CT
CLERMONT, FL 34711 US

Current Mailing Address:

205 WILLOW BEND DR
CLERMONT, FL 34711 US

New Mailing Address:

2430 HOLLY RIDGE CT
CLERMONT, FL 34711 US

FEI Number: 20-2112949

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KABA CONSULTING INC
205 W WASHINGTON ST
MINNEOLA, FL 34715 US

Name and Address of New Registered Agent:

KABA CONSULTING INC
214 E WASHINGTON ST
SUITE A
MINNEOLA, FL 34715 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: ALEJANDRO KABA

02/08/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PANTOJAS, JULIO
Address: 205 WILLOW BEND DR
City-St-Zip: CLERMONT, FL 34711 US

Title: O () Delete
Name: BUSTAMANTE, VALENTIN
Address: PO BOX 689
City-St-Zip: MASCOTTE, FL 34753 US

Title: O () Delete
Name: HERNANDEZ, JUAN J
Address: PO BOX 689
City-St-Zip: MASCOTTE, FL 34753 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PANTOJAS, JULIO
Address: 2430 HOLLY RIDGE CT
City-St-Zip: CLERMONT, FL 34711 US

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

Title: O (X) Change () Addition
Name: GRIMALDO, ISRAEL
Address: 739 ASHLAND ST
City-St-Zip: MASCOTTE, FL 34753 US

Title: O () Change (X) Addition
Name: MAGDALENO, ANTHONY
Address: 116 SOUTH TALDOTT AVE
City-St-Zip: MASCOTTE, FL 34753 US

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: JULIO PANTOJAS

P

02/08/2006

Electronic Signature of Signing Officer or Director

Date