

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000018813

FILED
Apr 16, 2008
Secretary of State

Entity Name: ROBINSON PAINTING 707 INC

Current Principal Place of Business:

486 S.E. STRAIT AVE.
PORT SAINT LUCIE, FL 34983

New Principal Place of Business:

1042 SW ALCANTARA BLVD
PORT SAINT LUCIE, FL 34953

Current Mailing Address:

486 S.E. STRAIT AVE.
PORT SAINT LUCIE, FL 34983

New Mailing Address:

PO BOX 8269
PORT SAINT LUCIE, FL 34985

FEI Number: 20-2291194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FLORES, HECTOR R SR
486 S.E. STRAIT AVE
PORT SAINT LUCIE, FL 34983 US

Name and Address of New Registered Agent:

FLORES, HECTOR R SR
1042 SW ALCANTARA BLVD
PORT SAINT LUCIE, FL 34953 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 R. FLORES

04/16/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FLORES, HECTOR R SR
Address: 486 S.E. STRAIT AVE.
City-St-Zip: PORT SAINT LUCIE, FL 34983 US

Title: S () Delete
Name: FLORES, HECTOR R SR
Address: 486 S.E. STRAIT AVE.
City-St-Zip: PORT SAINT LUCIE, FL 34983 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FLORES, HECTOR R SR
Address: 1042 SW ALCANTARA BLVD
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: S (X) Change () Addition
Name: FLORES, HECTOR R SR
Address: 1042 SW ALCANTARA BLVD
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

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: HECTOR R FLORES

P

04/16/2008

Electronic Signature of Signing Officer or Director

Date