

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000027022

FILED
May 08, 2006
Secretary of State

Entity Name: DOEL MONTES PAINTING , INC.

Current Principal Place of Business:

515 DELIDO WAY
KISSIMMEE,, FL 34758

New Principal Place of Business:

301 FERRARA CT
KISSIMMEE,, FL 34758

Current Mailing Address:

515 DELIDO WAY
KISSIMMEE,, FL 34758

New Mailing Address:

301 FERRERA CT
KISSIMMEE,, FL 34758

FEI Number: 20-2387430

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTES, DOEL
515 DELIDO WAY
KISSIMMEE, FL 34758 US

Name and Address of New Registered Agent:

MONTES, DOEL
301 FERRERA CT
KISSIMMEE, FL 34758 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: DOEL MONTES

05/08/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: MONTES,, TASHA
Address: 515 DELIDO WAY
City-St-Zip: KISSIMMEE,, FL 34758 US

Title: P () Delete
Name: MONTES, DOEL
Address: 515 DELIDO WAY
City-St-Zip: KISSIMMEE, FL 34758

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: MONTES,, TASHA
Address: 301 FERRERA
City-St-Zip: KISSIMMEE,, FL 34758 US

Title: P (X) Change () Addition
Name: MONTES, DOEL
Address: 301 F3ERRERA
City-St-Zip: KISSIMMEE, FL 34758

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: DOEL MONTES

P

05/08/2006

Electronic Signature of Signing Officer or Director

Date