## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000041824

**Entity Name: BRAGATTO PAINTING CORPORATION** 

FILED Apr 29, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1403 GRAND SAVANA PALM 2602 SW CAMEO BLVD

SUITE 1403 PORT ST LUCIE, FL 34953 US FT. PIERCE, FL 34982

Current Mailing Address: New Mailing Address:

1403 GRAND SAVANA PALM 2602 SW CAMEO BLVD

SUITE 1403 PORT ST LUCIE, FL 34953 US FT. PIERCE, FL 34982

FEI Number: 20-2528753 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TAX HOUSE CORPORATION RODRIGUES, ADELIA M
1261 E. SAMPLE RD. 2602 SW CAMEO BLVD

POMPANO BCH, FL 33064 US PORT ST 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: ADELIA M RODRIGUES 04/29/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: RODRIGUES, ADELIA M Name: RODRIGUES, ADELIA M

 Address:
 2343 SW MOUNTWELL ST.
 Address:
 2602 SW CAMEO BLVD

 City-St-Zip:
 PORT ST. LUCIE, FL 34986
 City-St-Zip:
 PORT ST. LUCIE, FL 34953 US

Title: D ( ) Delete Title: D (X) Change ( ) Addition
Name: BRAGATTO, ROBERTO R
Name: BRAGATTO, ROBERTO R

Address: 2343 SW MOUNTWELL ST. Address: 2602 SW CAMEO BLVD
City-St-Zip: PORT ST. LUCIE, FL 34986 City-St-Zip: PORT ST. LUCIE, FL 34953 US

Title: D ( ) Delete Title: D (X) Change ( ) Addition

Name:SOARES, MARCIO DOUGLASName:BRAGATTO, JERONIMOAddress:401 GRAND CLUB AVE., APT AAddress:2602 SW CAMEO BLVDCity-St-Zip:FT. PIERCE, FL 34982City-St-Zip:PORT ST LUCIE, FL 34953 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: ADELIA M RODGRIGUES PD 04/29/2006