## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000066298

Entity Name: ARNOLDO REMODELING SERVICES INC

FILED Mar 21, 2006 Secretary of State

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

986 ROLLINGWOOD LOOP 652 CYPRESS LN

# 102 WINTER SPRINGS, FL 32708 US CASSELBERRY, FL 32707 US

Current Mailing Address: New Mailing Address:

986 ROLLINGWOOD LOOP 652 CYPRESS LN

# 102 WINTER SPRINGS, FL 32708 US

CASSELBERRY, FL 32707 US

FEI Number: 20-2734276 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:

VALENCIA, ARNOLDO
986 ROLLINGWOOD LOOP
4 102

VALENCIA, ARNOLDO
652 CYPRESS LN
WINTER SPRINGS EL 32708 LL

# 102 WINTER SPRINGS, FL 32708 US CASSELBERRY, FL 32707 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: ARNOLDO VALENCIA 03/21/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 VALENCIA, ARNOLDO
 Name:
 VALENCIA, ARNOLDO

 Address:
 986 ROLLINWOOD LOOP # 102
 Address:
 652 CYPRESS LN

City-St-Zip: CASSELBERRY, FL 32707 US City-St-Zip: WINTER SPRINGS, FL 32708 US

 Name:
 OROZCO, LUZ E
 Name:
 OROZCO, LUZ E

 Address:
 986 ROLLINGWOOD LOOP # 102
 Address:
 652 CYPRESS LN

City-St-Zip: CASSELBERRY, FL 32707 US City-St-Zip: WINTER SPRINGS, FL 32708 US

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

 Name:
 RIOS, FRANCISCO
 Name:

 Address:
 1195 MANCHA REAL DR
 Address:

 City-St-Zip:
 ORLANDO, FL 32707 US
 City-St-Zip:

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: ARNOLDO VALENCIA P 03/21/2006