

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000107019

Entity Name: SOUTH QUALITY PAINTING, INC

FILED
Jun 16, 2006
Secretary of State

Current Principal Place of Business:

5610 PINNACLE HEIGHTS CIR
309
TAMPA, FL 33624 US

New Principal Place of Business:

6518 SECREST CT
TAMPA, FL 33625 US

Current Mailing Address:

5610 PINNACLE HEIGHTS CIR
309
TAMPA, FL 33624 US

New Mailing Address:

6518 SECREST CT
TAMPA, FL 33625 US

FEI Number: 20-3241484

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUIROZ, ELIAS
5610 PINNACLE HEIGHTS CIR
309
TAMPA, FL 33624 US

Name and Address of New Registered Agent:

QUIROZ, ELIAS
6518 SECREST CT
TAMPA, FL 33625 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: ELIAS QUIROZ

06/16/2006

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: D () Delete
Name: QUIROZ, ELIAS
Address: 5610 PINNACLE HEIGHTS CIR # 309
City-St-Zip: TAMPA, FL 33624 US

Title: D () Delete
Name: OROZCO, JAMES
Address: 8319 PALMA VISTA LN
City-St-Zip: TAMPA, FL 33614 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: QUIROZ, ELIAS
Address: 6518 SECREST CT
City-St-Zip: TAMPA, FL 33625 US

Title: () Change () Addition
Name:
Address:
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: ELIAS QUIROZ

D

06/16/2006

Electronic Signature of Signing Officer or Director

Date