

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000110974

FILED
Mar 01, 2006
Secretary of State

Entity Name: W.R. PIMENTA CORPORATION

Current Principal Place of Business:

6258 PEREGRINE CT
ORLANDO, FL 32819 US

New Principal Place of Business:

1324 BUENA VISTA AVE
ORLANDO, FL 32818 US

Current Mailing Address:

6258 PEREGRINE CT
ORLANDO, FL 32819 US

New Mailing Address:

1324 BUENA VISTA AVE
ORLANDO, FL 32818 US

FEI Number: 20-3282480

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACCOUNT BOOKKEEPING CORP.
5950 LAKEHURST DR
246
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PIMENTA, WELINGTON R
Address: 6258 PEREGRINE CT
City-St-Zip: ORLANDO, FL 32819 US

Title: VP () Delete
Name: SOARES, DIRCE M
Address: 6258 PEREGRINE CT
City-St-Zip: ORLANDO, FL 32819 US

Title: DT () Delete
Name: PIMENTA, FABRICIO M
Address: 6258 PEREGRINE CT
City-St-Zip: ORLANDO, FL 32819 US

Title: S (X) Delete
Name: GARCIA, EDIEMES F
Address: 6258 PEREGRINE CT
City-St-Zip: ORLANDO, FL 32819 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PIMENTA, WELINGTON R
Address: 1324 BUENA VISTA AVE
City-St-Zip: ORLANDO, FL 32818 US

Title: VP (X) Change () Addition
Name: SOARES, DIRCE M
Address: 1324 BUENA VISTA AVE
City-St-Zip: ORLANDO, FL 32818 US

Title: DT (X) Change () Addition
Name: GARCIA, EDIEMES F
Address: 1324 BUENA VISTA AVE
City-St-Zip: ORLANDO, FL 32818 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: WELLINGTON PIMENTA

P

03/01/2006

Electronic Signature of Signing Officer or Director

_____ Date