## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000114207

Entity Name: CHAVO FRAMING INC.

PLANT CITY, FL 33563 US

FILED Jul 05, 2007 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

412 ARMOUR ST. 114 FLAMINGO DR.

APT A AUBURNDALE, FL 33823 AUBURNDALE, FL 33823

Current Mailing Address: New Mailing Address:

412 ARMOUR ST. 114 FLAMINGO DR

APT A AUBURNDALE, FL 33823 AUBURNDALE, FL 33823

FEI Number: 20-3311326 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:

WALDEN LAKE BUSINESS SERVICES INC
304 E. BAKER ST.

CONTRACTORS NOTICING SERVICES INC.
103 E. DR. ML KING BLVD.

304 E. BAKER ST. 103 E. DR. ML KING BLY SUITE D PLANT CITY, FL 33563

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: DAVID DURLAND 07/05/2007

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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 JUAREZ, SALVADOR
 Name:
 JUAREZ, SALVADOR

 Address:
 412 ARMOUR ST. APT A
 Address:
 114 FLAMINGO DR.

 City-St-Zip:
 AUBURNDALE, FL 33823
 City-St-Zip:
 AUBURNDALE, FL 33823

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

 Name:
 RAMIREZ, NICOLAS
 Name:

 Address:
 412 ARMOUR ST. APT A
 Address:

 City-St-Zip:
 AUBURNDALE, FL 33823
 City-St-Zip:

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

 Name:
 HERNANDEZ, JUVENAL
 Name:

 Address:
 412 ARMOUR ST. APT A
 Address:

 City-St-Zip:
 AUBURNDALE, FL 33823
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SALVADOR JUAREZ P 07/05/2007