

# 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000115123

Entity Name: PAD PEGAS STUCCO INC

FILED  
Nov 15, 2007  
Secretary of State

## Current Principal Place of Business:

737 HICKORY MANOR DRIVE  
JACKSONVILLE, FL 32225

## New Principal Place of Business:

12279 HEARTLEAF COURT  
JACKSONVILLE, FL 32225

## Current Mailing Address:

737 HICKORY MANOR DRIVE  
JACKSONVILLE, FL 32225

## New Mailing Address:

12279 HEARTLEAF COURT  
JACKSONVILLE, FL 32225

FEI Number: 20-3337536

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KNAP, PETER  
737 HICKORY MANOR DRIVE  
JACKSONVILLE, FL 32225 US

## Name and Address of New Registered Agent:

KNAP, PETER  
12279 HEARTLEAF COURT  
JACKSONVILLE, FL 32225 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: PETER KNAP

11/15/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: KNAP, PETER  
Address: 737 HICKORY MANOR DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225

Title: S ( ) Delete  
Name: KNAP, PETER  
Address: 737 HICKORY MANOR DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225

Title: VP ( ) Delete  
Name: MENDOZA, FLORENTINO L  
Address: 737 HICKORY MANOR DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225

Title: VP (X) Delete  
Name: MARTINEZ, ESTEBAN  
Address: 737 HICKORY MANOR DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: KNAP, PETER  
Address: 12279 HEARTLEAF COURT  
City-St-Zip: JACKSONVILLE, FL 32225

Title: DIR (X) Change ( ) Addition  
Name: MARTINEZ, CRISTIAN  
Address: 12279 HEARTLEAF COURT  
City-St-Zip: JACKSONVILLE, FL 32225

Title: VP (X) Change ( ) Addition  
Name: MARTINEZ, ESTEBAN  
Address: 12279 HEARTLEAF COURT  
City-St-Zip: JACKSONVILLE, FL 32225

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: PETER KNAP

PRES

11/15/2007

Electronic Signature of Signing Officer or Director

Date