

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000115877

FILED  
Apr 14, 2007  
Secretary of State

**Entity Name:** OCTOPUS INTERIOR & EXTERIOR RESTORATION, INC.

**Current Principal Place of Business:**

1680 NE 191ST APT 100  
NORTH MIAMI BEACH, FL 33179

**New Principal Place of Business:**

**Current Mailing Address:**

1680 NE 191ST APT 100  
NORTH MIAMI BEACH, FL 33179

**New Mailing Address:**

**FEI Number:** 20-3326401

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

QUINONEZ, JUAN CARLOS  
1680 NE 191ST APT 100  
NORTH MIAMI BEACH, FL 33179 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: QUINONEZ, JUAN CARLOS  
Address: 1680 NE 191ST APT 100  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PTS (X) Change ( ) Addition  
Name: QUINONEZ, JUAN CARLOS  
Address: 1680 NE 191ST APT 100  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

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:** JUAN CARLOS QUINONEZ

PRES

04/14/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date