2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000128890

Title:

Name:

Address:

City-St-Zip:

() Delete

FILED Aug 30, 2007 Secretary of State

Entity Na	me: SANTOS	FRAMING CORPORATION			
Current Principal Place of Business:			New Principal Place of Business:		
20 RYDEL PALM CO	LLANE AST, FL 32164	l US			
Current Mailing Address:			New Mailing Address:		
20 RYDEL PALM CO	LLANE AST, FL 32164	l US			
FEI Number	: 20-3500794	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:		
ACCOUNT BOOKKEEPING CORP 5950 LAKEHURST DR 246 ORLANDO, FL 32819 US			DOS SANTOS, SIRLENE 20 RYDELL LANE PALM COAST, FL 32164 US		
	e named entity s e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: SIRLENE DOS SANTOS				08/30/2007	
	Electron	ic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financing	3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	·		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () DOS SANTOS, 20 RYDELL LAI PALM COAST,	NE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () DE MORAES, C 20 RYDELL LAI PALM COAST,	NE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () DE SILVA, AGN 17A PINE HURS PALM COAST,	ST LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	

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 an an enterphase with an eddress with all other like empowered. above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: SIRLENE DOS SANTOS Ρ 08/30/2007

() Change (X) Addition

ROCHA, JOAO S

20 RYDELL LANE

PALM COAST, FL 32164 US