

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000130701

FILED  
Mar 15, 2006  
Secretary of State

**Entity Name:** PROPERTY MAINTENANCE PAINTERS OF ORLANDO, INC.

**Current Principal Place of Business:**

5417 POINTE VISTA CIRCLE  
APT 106  
ORLANDO, FL 32839 US

**New Principal Place of Business:**

**Current Mailing Address:**

5417 POINTE VISTA CIRCLE  
APT 106  
ORLANDO, FL 32839 US

**New Mailing Address:**

**FEI Number:** 20-3520338

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TRUJILLO, FRANCISCO SR.  
5417 POINTE VISTA CIRCLE  
APT 106  
ORLANDO, FL 32839 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: TRUJILLO, FRANCISCO SR.  
Address: 5417 POINTE VISTA CIRCLE  
City-St-Zip: ORLANDO, FL 32839 US

Title: VP ( ) Delete  
Name: CASTILLO, SYLVIA  
Address: 5417 POINTE VISTA CIRCLE  
City-St-Zip: ORLANDO, FL 32839 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DIRE ( ) Change (X) Addition  
Name: HERNANDEZ, ERASMO  
Address: 5417 POINTE VISTA CIRCLE  
City-St-Zip: ORLANDO, FL 32839 US

Title: MG ( ) Change (X) Addition  
Name: LAURORE, DURES  
Address: 5417 POINTE VISTA CIRCLE  
City-St-Zip: ORLANDO, FL 32839 US

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: ERASMO HERNANDEZ/DURES LAURORE

DIR/

03/15/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date