## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000141600

Address:

City-St-Zip:

301 WINTER ST

WINTER GARDEN, FL 34787 US

FILED Mar 23, 2006 Secretary of State

Entity Nar	me: MACIAS	& MACIAS	PAINTING INC				
Current Principal Place of Business:				New Prin	New Principal Place of Business:		
301 WINTE WINTER G	ER ST GARDEN, FL (	34787 U	S				
Current Mailing Address:				New Mail	New Mailing Address:		
301 WINTE WINTER C	ER ST GARDEN, FL (	34787 U	S				
FEI Number: 20-3650055 FEI Number Applied For ( )			FEI Number Not Ap	Number Not Applicable ( ) Certificate of Status Desired ( )			
Name and Address of Current Registered Agent:				Name an	Name and Address of New Registered Agent:		
KABA CONSULTING INC 205 W WASHINGTON ST SUITE C MINNEOLA, FL 34715 US				214 E WA SUITE A	KABA CONSULTING INC 214 E WASHINGTON ST SUITE A MINNEOLA, FL 34715 US		
	named entity s e of Florida.	submits this	s statement for the p	urpose of changing	its registered	office or registered agent, or both,	
SIGNATURE: ALEJANDRO KABA					03/23/2006		
Electronic Signature of Registered Agent				ent	Date		
Election Car	npaign Financin	g Trust Fund	Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P ( ) MACIAS, MIGU 301 WINTER S WINTER GARD	Т	37 US	Title: Name: Address: City-St-Zip:	·	) Change ()Addition	
Title: Name: Address: City-St-Zip:	DIR ( ) MACIAS, FRAN 301 WINTER S WINTER GARD	Т	37 US	Title: Name: Address: City-St-Zip:		)Change ()Addition	
Title: Name:	DIR ( ) MACIAS, JAVIE	) Delete :R		Title: Name:	(	) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: MIGUEL MACIAS P 03/23/2006