# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 01, 2006**
**Secretary of State**

DOCUMENT# P05000150716

**Entity Name:** CARIBBEAN PAINTING & WATERPROOFING CORP.

**Current Principal Place of Business:**

16171 NW 24 ST
PEMBROKE PINES, FL 33028

**New Principal Place of Business:**

12885 SW 49 COURT
MIRAMAR, FL 33027

**Current Mailing Address:**

16171 NW 24 ST
PEMBROKE PINES, FL 33028

**New Mailing Address:**

12885 SW 49 COURT
MIRAMAR, FL 33027

**FEI Number: 20-3802271** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

DE CRUZ, ROSMAN
16171 NW 24 ST
PEMBROKE PINES, FL 33028 US

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

DE CRUZ, ROSMAN
12885 SW 49 COURT
MIRAMAR, FL 33027 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: 05/01/2006
Electronic Signature of Registered Agent — Date

**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**
**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete
Name: DE CRUZ, ROSMAN MANAGER
Address: 16171 NW 24 ST
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VD ( ) Delete
Name: PENA, NATHALIE
Address: 16171 NW 24 ST
City-St-Zip: PEMBROKE PINES, FL 33028

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

Title: PD (X) Change ( ) Addition
Name: DE CRUZ, ROSMAN MANAGER
Address: 12885 SW 49 COURT
City-St-Zip: MIRAMAR, FL 33027

Title: VD (X) Change ( ) Addition
Name: PENA, NATHALIE
Address: 12885 SW 49 COURT
City-St-Zip: MIRAMAR, FL 33027

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: ROSMAN DE CRUZ PD 05/01/2006
Electronic Signature of Signing Officer or Director — Date