

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000154127

Entity Name: YOHOA PAINTING CORP.

FILED  
Apr 01, 2008  
Secretary of State

**Current Principal Place of Business:**

1670 JAMESTON CT  
FT MYERS, FL 339071105

**New Principal Place of Business:**

**Current Mailing Address:**

1670 JAMESTON CT  
FT MYERS, FL 339071105

**New Mailing Address:**

FEI Number: 20-3825531

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TAX HOUSE CORPORATION  
1261 E SAMPLE RD  
POMPANO BCH, FL 33064 US

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

TAX HOUSE CORPORATION  
1100 S FEDERAL HWY  
2ND FLOOR  
DEERFIELD BCH, FL 33441 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: TAX HOUSE CORPORATION

04/01/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LOPEZ, HECTOR D  
Address: 1670 JAMESTON C  
City-St-Zip: FT MYERS, FL 33907

Title: VP (X) Delete  
Name: LALLIER, RUSSELL J  
Address: 1670 JAMESTON C  
City-St-Zip: FT MYERS, FL 33907

Title: D (X) Delete  
Name: LARAVIEGA, NILSSON  
Address: 1670 JAMESTON C  
City-St-Zip: FT MYERS, FL 339071105

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

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

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

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

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 on an attachment with an address, with all other like empowered.

SIGNATURE: HECTOR D LOPEZ

P

04/01/2008

Electronic Signature of Signing Officer or Director

Date