

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000159997

FILED
Sep 01, 2008
Secretary of State

Entity Name: FRED WALL TEXTURE & PAINTING, INC.

Current Principal Place of Business:

316 NW 17TH AVE
POMPANO BCH, FL 33069

New Principal Place of Business:

Current Mailing Address:

316 NW 17TH AVE
POMPANO BCH, FL 33069

New Mailing Address:

FEI Number: 20-3909050

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GARCIA, FREDDY
316 NW 17TH AVE
POMPANO BCH, FL 33069 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

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: GARCIA, FREDDY
Address: 316 NW 17TH AVE
City-St-Zip: POMPANO BCH, FL 33069

Title: DV () Delete
Name: CALIX, GLORIA
Address: 316 NW 17TH AVE
City-St-Zip: POMPANO BCH, FL 33069

Title: DV () Delete
Name: CALIX, GLORIA E
Address: 316 NW TH 17 AVE
City-St-Zip: POMPANO BEAH, FL 33069

Title: PD () Delete
Name: GARCIA, FREDY R
Address: 316 NW TH 17 AVE
City-St-Zip: POMPANO BEACH, FL 33069

Title: PD () Delete
Name: GARCIA, FREDY R
Address: 316 NW TH 17 AVE
City-St-Zip: POMPANO BEACH, FL 33069

Title: DV () Delete
Name: CALIX, GLORIA E
Address: 316 NW TH 17 AVE
City-St-Zip: POMPNO BEACH, FL 33069

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:

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: FREDY GARCIA

PD

09/01/2008

Electronic Signature of Signing Officer or Director

Date