2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000004445

Address:

City-St-Zip:

392 W MELODY LANE

CASSELBERRY, FL 32707

Entity Name: H.R. COATINGS & RESTORATION INC.

FILED Apr 29, 2008 Secretary of State

		THEO & TREO FOR THORY, IT VE	,		
Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
	LODY LANE ERRY, FL 327	07			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
392 W MELODY LANE CASSELBERRY, FL 32707			3807 PYRITE DRIVE ORLANDO, FL 32826		
FEI Number:	20-4062323	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
FERNANDEZ, VICTORIA 392 W MELODY LANE CASSELBERRY, FL 32707 US			3807 PYRITE DRIVE ORLANDO, FL 32826	ORLANDO, FL 32826 US	
	named entity s of Florida.	submits this statement for the p	ourpose of changing its registered	I office or registered agent, or both,	
SIGNATURE:				04/29/2008	
	Electron	ic Signature of Registered Age	ent	Date	
Election Car	npaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () FERNANDEZ, J 392 W MELOD CASSELBERRY	Y LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () SWETMON, DA 392 W MELOD' CASSELBERRY	Y LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	O () FERNANDEZ. V	Delete ICTORIA	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: VICTORIA FERNANDEZ O 04/29/2008