

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P06000005660

**FILED**  
**May 10, 2007**  
**Secretary of State****Entity Name:** SILVA'S PAINTING & GENERAL SERVICES CORP**Current Principal Place of Business:**7448 GOLDEN GLENN DR.  
ORLANDO, FL 32807 US**New Principal Place of Business:**5036 DR PHILLIPS BLVD  
SUITE 354  
ORLANDO, FL 32819 US**Current Mailing Address:**7448 GOLDEN GLENN DR.  
ORLANDO, FL 32807 US**New Mailing Address:**5036 DR PHILLIPS BLV  
SUITE 354  
ORLANDO, FL 32819 US**FEI Number:** 20-4124359**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**ASSIS FILHO, JARBAS E DP  
7448 GOLDEN GLENN DR.  
ORLANDO, FL 32807 US**Name and Address of New Registered Agent:**DA SILVA, JOSE L DP  
5036 DR PHILLIPS BLVD  
SUITE 354  
ORLANDO, FL 32819 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:** JOSE LEONIDAS DA SILVA

05/10/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ASSIS FILHO, JARBAS E  
Address: 7448 GOLDEN GLENN DR.  
City-St-Zip: ORLANDO, FL 32807 US

Title: VP (X) Delete  
Name: ASSIS FILHO, JARBAS E  
Address: 7448 GOLDEN GLENN DR.  
City-St-Zip: ORLANDO, FL 32807 US

Title: T (X) Delete  
Name: ASSIS, BRUNO L  
Address: 7448 GOLDEN GLENN DR.  
City-St-Zip: ORLANDO, FL 32807 US

Title: S (X) Delete  
Name: DE ASSIS, JOAO L  
Address: 7448 GOLDEN GLENN DR.  
City-St-Zip: ORLANDO, FL 32807 US

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

Title: P (X) Change ( ) Addition  
Name: DA SILVA, JOSE L P  
Address: 5036 DR PHILLIPS BLVD  
City-St-Zip: ORLANDO, FL 32819 US

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:** JOSE LEONIDAS DA SILVA

P

05/10/2007

Electronic Signature of Signing Officer or Director

Date