

2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
May 18, 2009
Secretary of State**

DOCUMENT# P06000019576

Entity Name: SALFRAN PAINTING INC

Current Principal Place of Business:

24 HOLLOY BRANCH ROAD
APOPKA, FL 32703

New Principal Place of Business:

Current Mailing Address:

24 HOLLOY BRANCH ROAD
APOPKA, FL 32703

New Mailing Address:

FEI Number: 20-4339951 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, VICTOR
24 HOLLOW BRANCH RD
APOPKA, FL 32703 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: PRE () Delete
Name: GONZALEZ, VICTOR
Address: 24 HOLLOW BRANCH RD
City-St-Zip: APOPKA, FL 32703 US

Title: DIR () Delete
Name: GONZALEZ, RUBEN
Address: 1421 GREEN RIDGE
City-St-Zip: APOPKA, FL 32703 US

Title: D () Delete
Name: SOSA, NORA
Address: 1476 HARVY CIRCLE
City-St-Zip: APOPKA, FL 32703

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: VICTOR GONZALEZ

PRE

05/18/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date