2008 FOR PROFIT CORPORATION ANNUAL REPORT **DOCUMENT # P06000025525** NEW WAY STUCCO & PLASTERING, INC. Principal Place of Business Mailing Address 3414 CORD STREET 3414 CORD STREET TAMPA, FL 33605 TAMPA, FL 33605 US DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent

FILED Apr 28, 2008 08:00 AN Secretary of State



No Chg-P CR2E034 (11/05) 04162008

4. FEI Number 20-3638017

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO	NOT	WRITE
IN	THIS	SPACE

8. The above named antity submits this statement for the purpose of changing its registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Superior, typed or private name of registered agent and the 1 applicable. (NOTE, Registered Agent Superior Impaired when refressing) DATE	9064 POLK AVE. JACKSONVILLE, FL 32208			IN THIS SPACE				
FILE NOWIII PEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.	8. 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. I am familiar with, and accept the obligations of registered agent,							
After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. The MANE STREET ADDRESS CITY-ST-ZIP TITLE MANE STREET ADDRESS CITY-ST-ZIP TITLE								
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NAME Street Address	NAME STREET ADDRESS							
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under path; that I am an officer or director	NAME STREET ADDRESS CITY-ST-ZIP 12. hereby c	ertify that the information supplied with this fill	ing does not qualify for the exe	mptions con	stained in Chapter 119	Provide Statutes. I further certify that the information		

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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 4

JONES, DOUGLAS C

4-26-08 813 623-1335