2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000028791

Entity Name: 7M'S PAINTING INC

City-St-Zip:

BRANDON, FL 33510

FILED May 07, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 8533 QUARTER HORSE DRIVE RIVERVIEW, FL 33569 **Current Mailing Address: New Mailing Address:** 8533 QUARTER HORSE DRIVE RIVERVIEW, FL 33569 FEI Number: 20-4395570 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MORALES, HECTOR 8533 QUARTER HORSE DRIVE RIVERVIEW, FL 33569 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition MORALES, HECTOR Name: Name: 8533 QUARTER HORSE DRIVE Address: Address: City-St-Zip: RIVERVIEW, FL 33569 US City-St-Zip: Title: DV Title: () Delete () Change () Addition Name: MORALES, AGUEDA Name: 8533 QUARTER HORSE DRIVE Address: Address: RIVERVIEW, FL 33569 US City-St-Zip: City-St-Zip: Title: () Delete Title: DS () Change () Addition BOCALETTI, ALMA Name: Name: 15600 SW 144 AVENUE Address: Address: City-St-Zip: MIAMI, FL 33177 US City-St-Zip: Title: () Delete Title: () Change () Addition MORALES, CARMELO Name: Name: Address: 407 B BIG CEDAR WAY Address:

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.

City-St-Zip:

SIGNATURE: HECTOR MORALES DP 05/07/2007