

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000047656

Entity Name: PETECA PETEL INC

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

304 GOLFVIEW RD
PH7
N PALM BEACH, FL 33408

Current Mailing Address:

304 GOLFVIEW RD
PH7
N PALM BEACH, FL 33408

New Principal Place of Business:

631 ALTAMIRA CIRCLE
206
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

631 ALTAMIRA CIRCLE
206
ALTAMONTE SPRINGS, FL 32701

FEI Number: 20-4618519

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVES, DIRCILENE M
304 GOLFVIEW RD
PH7
N PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

ALVES, DIRCILENE M
631 ALTAMIRA CIRCLE
206
ALTAMONTE SPRINGS, FL 33408 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:

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALVES, DIRCILENE M
Address: 304 GOLFVIEW RD APT PH7
City-St-Zip: N PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ALVES, DIRCILENE M
Address: 631 ALTAMIRA PLACE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: DIRCILENE ALVES

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date