2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000064996

Entity Name: GOPALS PRO PAINTING, INC

FILED May 30, 2009 Secretary of State

Littly Nan	ie. GOPALS P	FRO FAINTING, INC.			
Current Principal Place of Business:			New Principal Place	e of Business:	
	55TH DRIVE E, FL 32658				
Current Ma	ailing Address	::	New Mailing Addres	New Mailing Address:	
PO BOX 37 LA CROSS	'4 E, FL 32658				
FEI Number: 76-0828791		FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
SNITILY, JACOB P OWNER 20617 NW 55TH DRIVE LA CROSSE, FL 32658 US					
The above in the State		ubmits this statement for the pu	rpose of changing its register	ed office or registered agent, or both,	
SIGNATUR					
	Electroni	c Signature of Registered Agen	t	Date	
		(2)(b), F.S., the corporation did not a Trust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () I SNITILY, JACOB 20617 NW 55TH LA CROSSE, FL	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () I SNITILY, PIRET 20617 NW 55TH LA CROSSE, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: JACOB SNITILY PRES 05/30/2009