


2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

2. Mar 14, 2008 8:00 am
Secretary of State

02-12-2008 90019 048 ***158.75

DOCUMENT # P06000074074	
1. Entity Name HECTOR'S TRIM & FINISH CARPENTRY INC.	

Principal Place of Business 4202 W HOLLOWAY RD LOT #10 PLANT CITY FL 33567	Mailing Address P.O. BOX 754 DOVER FL 33527
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00000007



2. Principal Place of Business - No P.O. Box # 4202 W HOLLOWAY RD, LOT #10 State, Apt. #, etc. PLANT CITY FLORIDA City & State 33567 U.S.A. Zip Country	3. Mailing Address P.O. BOX 754 State, Apt. #, etc. DOVER FLORIDA City & State 33527 U.S.A. Zip Country
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1st MOORE CR2E034 (10/07)

4. FEI Number 20-4953199	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent RODRIGUEZ, HECTOR R 4202 W HOLLOWAY RD LOT #10 PLANT CITY FL 33567	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title. (NOTE: Registered Agent signature required when transferring.)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RODRIGUEZ, HECTOR R P.O. BOX 754 DOVER FL 33527 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Hector R Rodriguez 3-11-08 813-508-2047
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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ATTACHMENT

DOCUMENT # P06000074074					
1. Entity Name HECTOR'S TRIM & FINISH CARPENTRY INC.					
Principal Place of Business 4202 W HOLLOWAY RD LOT #10 PLANT CITY FL 33567			Mailing Address P.O. BOX 754 DOVER FL 33527		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 20-4953199	
Zip		Country		Applied For Not Applicable	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
RODRIGUEZ, HECTOR R 4202 W HOLLOWAY RD LOT #10 PLANT CITY FL 33567			Name Street Address (P.O. Box Number is Not Acceptable) City		
			FL Zip Code		
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.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P RODRIGUEZ, HECTOR R P.O. BOX 754 DOVER FL 33527		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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SIGNATURE: *Hector R Rodriguez* 3-11-08 813-508-2047

ATTACHMENT
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#P060000074074

HECTOR'S TRIM & FINISH CARPENTRY, INC.		346
PO BOX 754		63-215/631
DOVER, FL 33527-0754		
Date: 01-30-08		
Pay to the order of:	FLORIDA DEPARTMENT OF STATE	\$ 158.75
ONE HUNDRED & FIFTY EIGHT DOLLARS 75/100		Dollars
SUNTRUST	ACH RT. 061000104	
FOR PROFIT CORPORATION ANNUAL REPORT		