

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 14, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # P06000075907**

1. Entity Name

J PAINTING AND PRESSURE CLEANING, INC.



Principal Place of Business

4781 NW 103RD AVENUE  
SUNRISE, FL 33351

Mailing Address

4781 NW 103RD AVENUE  
SUNRISE, FL 33351



03122008

No Chg-P

CR2E034 (11/05)

4. FEI Number

20-4988842

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

HEREDIA, JUAN J  
4781 NW 103RD AVENUE  
SUNRISE, FL 33351

**DO NOT WRITE  
IN THIS SPACE**

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

Juan Heredia

Signature, typed or printed name of registered agent and title if applicable.

Juan Heredia

(NOTE: Registered Agent signature required when reinstating)

3/10/08

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PVTs  
HEREDIA, JUAN J  
4781 NW 103RD AVENUE  
SUNRISE, FL 33351

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
HEREDIA, JUAN J  
4781 NW 103RD AVENUE  
SUNRISE, FL 33351

TITLE  
NAME  
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CITY-ST-ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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04/01/08-80058-007 150.00

**DO NOT WRITE  
IN THIS SPACE**

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 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:

Juan Heredia

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Juan Heredia

3/10/08

Date

Daytime Phone #