

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000122098

FILED
Jan 21, 2008
Secretary of State

Entity Name: NOEL'S PAINTING & HANDY SERVICES INC.

Current Principal Place of Business:

2469 TALL MAPLE LOOP
OCOEE, FL 34761

New Principal Place of Business:

Current Mailing Address:

2469 TALL MAPLE LOOP
OCOEE, FL 34761

New Mailing Address:

FEI Number: 02-0789696

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUTTER, BERNARD R
1207 ILLINOIS AVE
ST CLOUD, FL 34769 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: TORRES, NOEL
Address: 2469 TALL MAPLE LOOP
City-St-Zip: OCOEE, FL 34761

Title: V () Delete
Name: TORRES, ANGELA
Address: 2469 TALL MAPLE LOOP
City-St-Zip: OCOEE, FL 34761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TORRES, NOEL
Address: 2469 TALL MAPLE LOOP
City-St-Zip: OCOEE, FL 34761

Title: VP (X) Change () Addition
Name: TORRES, ANGELA
Address: 2469 TALL MAPLE LOOP
City-St-Zip: OCOEE, FL 34761

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: ANGELA TORRES

VP

01/21/2008

Electronic Signature of Signing Officer or Director

Date