

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000130199

Entity Name: MPK PLASTERING & STUCCO INC

FILED  
Feb 01, 2007  
Secretary of State

## Current Principal Place of Business:

1600 MURPHY STREET  
OVIEDO, FL 32765 US

## New Principal Place of Business:

## Current Mailing Address:

1600 MURPHY STREET  
OVIEDO, FL 32765

## New Mailing Address:

FEI Number: 20-5701382

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

POMMELS, EROL  
1600 MURPHY STREET  
OVIEDO, FL 32765 US

## Name and Address of New Registered Agent:

POMMELS, EROL  
1600 MURPHY STREET  
OVIEDO, FL 32765 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: EROL POMMELS

02/01/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: POMMELS, EROL  
Address: 1600 MURPHY STREET  
City-St-Zip: OVIEDO, FL 32765

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: POMMELS, EROL  
Address: 1600 MURPHY STREET  
City-St-Zip: OVIEDO, FL 32765

Title: VP ( ) Change (X) Addition  
Name: MARCH, NOEL  
Address: 4755 KING COLE BLVD  
City-St-Zip: ORLANDO, FL 32811

Title: ST ( ) Change (X) Addition  
Name: KNIGHT, HOPETON P  
Address: 1262 OAKFORD PLACE  
City-St-Zip: OVIEDO, FL 32765

I hereby certify that the information supplied with this filing does not qualify for the 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: EROL POMMELS

P

02/01/2007

Electronic Signature of Signing Officer or Director

Date