## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P06000155835

Entity Name: V.H. PAINTING, INC.

FILED Oct 08, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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6294 18 ST S 4291 KENT AVE

WEST PALM BEACH, FL 33415 LAKE WORTH, FL 33461

Current Mailing Address: New Mailing Address:

6294 18 ST S 4291 KENT AVE

WEST PALM BEACH, FL 33415 LAKE WORTH, FL 33461

FEI Number: 01-0896208 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:

HERNANDEZ ULLOA, VICTOR C
6294 18 ST S
4291 KENT AVE
4291 KENT AVE

WEST PALM BEACH, FL 33415 US LAKE WORTH, FL 33461 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: VICTOR C. HERNANDEZ ULLOA 10/08/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: DP (X) Change ( ) Addition

Name: HERNANDEZ ULLOA, VICTOR C Name: HERNANDEZ ULLOA, VICTOR C Address: 6294 18 ST S Address: 4291 KENT AVE

City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: LAKE WORTH, FL 33461

Title: DV () Delete Title: DV (X) Change () Addition

Name: HERNANDEZ, CARIDAD M Name: HERNANDEZ, CARIDAD M

 Address:
 6294 18 ST S
 Address:
 4291 KENT AVE

 City-St-Zip:
 WEST PALM BEACH, FL 33415
 City-St-Zip:
 LAKE WORTH, FL 33461

Title: D ( ) Delete Title: ( ) Change ( ) Addition

Name: GOMEZ, HUMBERTO Name:
Address: 6294 18TH ST ST Address:

City-St-Zip: WEST PALM BEACH, FL 33415 Address.

Title: ( ) Delete Title: DS ( ) Change (X) Addition

 Name:
 Name:
 HERNANDEZ, CARIE M

 Address:
 Address:
 4291 KENT AVE

 City-St-Zip:
 City-St-Zip:
 LAKE WORTH, FL 33461

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: VICTOR C HERNANDEZ ULLOA DP 10/08/2007