## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000025155

Entity Name: SZABO STUCCO OF JAX INC

FILED Jun 02, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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315 SOUTHERN ROSE DRIVE JACKSONVILLE, FL 32225

Current Mailing Address: New Mailing Address:

315 SOUTHERN ROSE DRIVE JACKSONVILLE, FL 32225

FEI Number: 20-8518854 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:

RERUCHA, MAREK

315 SOUTHERN ROSE DRIVE

JACKOSNVILLE, FL 32225 US

PALLA, ROBERT

7701 TIMBERLINE PARK BLVD APT 1224

JACKOSNVILLE, FL 32256 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: ROBERT PALLA 06/02/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:** 

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: RERUCHA, MAREK Name: PALLA, ROBERT

Address: 315 SOUTHERN ROSE DRIVE Address: 7701 TIMBERLINE PARK BLVD APT 1224

City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: JACKSONVILLE, FL 32256

 Name:
 JANOSEK, MICHEIL
 Name:

 Address:
 315 SOUTHERN ROSE DRIVE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32225
 City-St-Zip:

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 TAKOS, ZOLTAN
 Name:

 Address:
 315 SOUTHERN ROSE DRIVE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32225
 City-St-Zip:

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: ROBERT PALLA PRES 06/02/2008