2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000044022

Entity Name: FPM APPLIANCE'S REPAIRS, CORP.

GREENACRES, FL 33415

City-St-Zip:

FILED Jul 05, 2008 Secretary of State

Current P	rincipal Place	e of Business:	New Principal Place o	New Principal Place of Business:	
623 SEA PINE WAY E-1 GREENACRES, FL 33415			REAR	5190 10 AVE NORTH REAR GREENACRES, FL 33463	
	failing Addre		,	New Mailing Address:	
623 SEA PINE WAY E-1 GREENACRES, FL 33415			5190 10 AVE NORTH REAR	5190 10 AVE NORTH	
FEI Number	: 20-8833010	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
The above in the State	PINE WAY CRES, FL 334 anamed entity e of Florida.		purpose of changing its registered	office or registered agent, or both,	
SIGNATU		nic Signature of Registered Ac	vont	 Date	
Election Ca	nce with s. 607.1	93(2)(b), F.S., the corporation did r g Trust Fund Contribution ().	not receive the prior notice.	S TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (MAIA, GERALI 623 SEA PINE GREENACRES	WAY	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address:	V (PIRES, GISEL 623 SEA PINE		Title: Name: Address:	() Change () Addition	

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: GERALDO MAIA P 07/05/2008