

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000076132

Entity Name: YEA-PLUS PAINTING SERVICES, INC.

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

10919 LOSCO JUNCTION DRIVE
JACKSONVILLE, FL 322573302 US

New Principal Place of Business:

10070 HAWKS HOLLOW RD
JACKSONVILLE, FL 322577603 US

Current Mailing Address:

10919 LOSCO JUNCTION DRIVE
JACKSONVILLE, FL 322573302 US

New Mailing Address:

10070 HAWKS HOLLOW RD
JACKSONVILLE, FL 322577603 US

FEI Number: 26-0523320

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUARTE, LUIS A
10919 LOSCO JUNCTION DRIVE
JACKSONVILLE, FL 322573302 US

Name and Address of New Registered Agent:

DUARTE, LUIS A
10070 HAWKS HOLLOW RD
JACKSONVILLE, FL 322577603 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: LUIS A DUARTE

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DUARTE, LUIS A
Address: 10919 LOSCO JUNCTION DRIVE
City-St-Zip: JACKSONVILLE, FL 322573302 US

Title: VP () Delete
Name: DUARTE, LUIS A
Address: 10919 LOSCO JUNCTION DRIVE
City-St-Zip: JACKSONVILLE, FL 322573302 US

Title: T () Delete
Name: DUARTE, LUIS A
Address: 10919 LOSCO JUNCTION DRIVE
City-St-Zip: JACKSONVILLE, FL 322573302 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DUARTE, LUIS A
Address: 10070 HAWKS HOLLOW RD
City-St-Zip: JACKSONVILLE, FL 322577603 US

Title: VP (X) Change () Addition
Name: DUARTE, LUIS A
Address: 10070 HAWKS HOLLOW RD
City-St-Zip: JACKSONVILLE, FL 322577603 US

Title: T (X) Change () Addition
Name: DUARTE, LUIS A
Address: 10070 HAWKS HOLLOW RD
City-St-Zip: JACKSONVILLE, FL 322577603 US

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: LUIS A DUARTE

P

04/29/2008

Electronic Signature of Signing Officer or Director

Date