

# **2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P07000113662

Entity Name: E & R CUSTOM FRAMING, INC

**FILED**  
**Dec 10, 2008**  
**Secretary of State**

## **Current Principal Place of Business:**

1109 CITRUS HILL CT  
SEFFNER, FL 33584

## **New Principal Place of Business:**

1603 SYDNEY DOVER ROAD  
DOVER, FL 33527

## **Current Mailing Address:**

P O BOX 1104  
MANGO, FL 33550

## **New Mailing Address:**

1603 SYDNEY DOVER ROAD  
DOVER, FL 33527

FEI Number: 26-1263804

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

ALVAREZ, RAFAEL  
1109 CITRUS HILL CRT  
SEFFNER, FL 33584 US

## **Name and Address of New Registered Agent:**

ELIZALDE, OMAR  
1603 SYDNEY DOVER ROAD  
DOVER, FL 33527 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: OMAR ELIZALDE

12/10/2008

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ALVAREZ, RAFAEL  
Address: 1109 CITRUS HILL CRT  
City-St-Zip: SEFFNER, FL 33584

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

## **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: ELIZALDE, OMAR  
Address: 1603 SYDNEY DOVER ROAD  
City-St-Zip: DOVER, FL 33527

Title: T ( ) Change (X) Addition  
Name: ELIZALDE, OMAR  
Address: 1603 SYDNEY DOVER ROAD  
City-St-Zip: DOVER, FL 33527

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: OMAR ELIZALDE

P

12/10/2008

Electronic Signature of Signing Officer or Director

Date