

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000052532

Entity Name: NAZARETH INSTALLATION INC.

FILED  
Apr 09, 2009  
Secretary of State

## Current Principal Place of Business:

4793 CASON COVE DR.  
#801  
ORLANDO, FL 32811

## Current Mailing Address:

4793 CASON COVE DR.  
#801  
ORLANDO, FL 32811

## New Principal Place of Business:

4421 S KIRKMAN RD  
#205  
ORLANDO, FL 32811

## New Mailing Address:

4421 S KIRKMAN RD  
#205  
ORLANDO, FL 32811

FEI Number: 26-2706943

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CANO, JESUS H  
120 S. ELM STREET  
FELLSMERE, FL 32948 US

## Name and Address of New Registered Agent:

CANO, PAULA  
4421 S KIRKMAN RD  
# 205  
ORLANDO, FL 32811 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: PAULA CANO

04/09/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CANO, JESUS H  
Address: 120 S. ELM STREET  
City-St-Zip: FELLSMERE, FL 32948

Title: S ( ) Delete  
Name: CANO, JESUS H  
Address: 120 S. ELM STREET  
City-St-Zip: FELLSMERE, FL 32948

Title: T ( ) Delete  
Name: CANO, JESUS H  
Address: 120 S. ELM STREET  
City-St-Zip: FELLSMERE, FL 32948

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CANO, PAULA  
Address: 4421 S KIRKMAN RD # 205  
City-St-Zip: ORLANDO, FL 32811

Title: VP (X) Change ( ) Addition  
Name: CANO, JESUS H  
Address: 4421 S KIRKMAN RD # 205  
City-St-Zip: ORLANDO, FL 32811

Title: DIR (X) Change ( ) Addition  
Name: GOMES, CIRES PAULO  
Address: 4421 S KIRKMAN RD # 205  
City-St-Zip: ORLANDO, FL 32811

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: PAULA CANO

PD

04/09/2009

Electronic Signature of Signing Officer or Director

Date