

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000061558

FILED
Jan 22, 2009
Secretary of State

Entity Name: SKETCH QUALITY CONTRACTORS, INC.

Current Principal Place of Business:

1212 66TH STREET NORTH
ST. PETERSBURG, FL 33710

New Principal Place of Business:

14218 CHEVAL MAYFAIRE DR.
101
ORLANDO, FL 32828 76

Current Mailing Address:

SKETCH QUALITY CONTRACTORS, INC.
P.O BOX 340808
TAMPA, FL 33694

New Mailing Address:

14218 CHEVAL MAYFAIRE DR.
101
ORLANDO, FL 32828 US

FEI Number: 38-3786709

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RISTORCELLI, PETER J
1212 66TH STREET NORTH
ST. PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

PEREZ, ELISA E
14218 CHEVAL MAYFAIRE DR. #101
ORLANDO, FL 32828 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: ELISA E. PEREZ

01/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PEREZ, ELISA
Address: 1212 66TH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

Title: M () Delete
Name: ARLEO, YAELESWI
Address: 5414 LAKE LE CLARE ROAD
City-St-Zip: LUTZ, FL 33558

Title: V () Delete
Name: ROA, FELIX
Address: 5414 LAKE LE CLARE ROAD
City-St-Zip: LUTZ, FL 33558

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PEREZ, ELISA
Address: 14218 CHEVAL MAYFAIRE DR. #101
City-St-Zip: ORLANDO, FL 32828 US

Title: M (X) Change () Addition
Name: ARLEO, YAELESWI
Address: 5414 LAKE LE CLARE ROAD
City-St-Zip: LUTZ, FL 33558 US

Title: V (X) Change () Addition
Name: ROA, FELIX
Address: 5414 LAKE LE CLARE ROAD
City-St-Zip: LUTZ, FL 33558 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: ELISA E. PEREZ

P

01/22/2009

Electronic Signature of Signing Officer or Director

Date