

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000076906

FILED  
Apr 13, 2009  
Secretary of State

Entity Name: USA PAINTING & FINISH CORP

## Current Principal Place of Business:

412 NW 47TH STREET  
POMPANO BEACH, FL 33064 US

## New Principal Place of Business:

424 EL VEDADO  
WEST PALM BEACH, FL 33405 US

## Current Mailing Address:

412 NW 47TH STREET  
POMPANO BEACH, FL 33064 US

## New Mailing Address:

424 EL VEDADO  
WEST PALM BEACH, FL 33405 US

FEI Number: 26-3199520

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DIAS, ADEMILSON M  
412 NW 47TH STREET  
POMPANO BEACH, FL 33064 US

## Name and Address of New Registered Agent:

DIAS, ADEMILSON M  
424 EL VEDADO  
WEST PALM BEACH, FL 33405 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: ADEMILSON M DIAS

04/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DIAS, ADEMILSON M  
Address: 412 NW 47TH STREET  
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: VP ( ) Delete  
Name: NAJARRO, JUAN ADELMO O  
Address: 412 NW 47TH STREET  
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: D ( ) Delete  
Name: PACHECO, DAVID A  
Address: 1760 3RD AVE. NORTH, #103  
City-St-Zip: LAKE WORTH, FL 33460 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: DIAS, ADEMILSON M  
Address: 424 EL VEDADO  
City-St-Zip: WEST PALM BEACH, FL 33405 US

Title: VP (X) Change ( ) Addition  
Name: NAJARRO, JUAN ADELMO O  
Address: 412 NW 47TH ST  
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: ADEMILSON M DIAS

P

04/13/2009

Electronic Signature of Signing Officer or Director

Date