

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000008274

Entity Name: C & E SINDING INC.

FILED  
Apr 20, 2011  
Secretary of State

**Current Principal Place of Business:**

3838 WINDRIDGE CT  
JACKSONVILLE, FL 32257 US

**New Principal Place of Business:**

**Current Mailing Address:**

3838 WINDRIDGE CT  
JACKSONVILLE, FL 32257 US

**New Mailing Address:**

FEI Number: 26-4140367

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GONCALVES, CLAUDIO R  
3838 WINDRIDGE CT  
JACKSONVILLE, FL 32257 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GONCALVES, CLAUDIO R  
Address: 3838 WINDRIDGE CT  
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: VP  
Name: ALONSO CASTILLO, MARIO ALBERTO  
Address: 4263 LOSCO RD #1511  
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: D  
Name: NOUGUEIRA RODRIGUES, RUI  
Address: 4263 LOSCO RD #1514  
City-St-Zip: JACKSONVILLE, FL 32257 US

I hereby 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 all other like empowered.

SIGNATURE: CLAUDIO R GONCALVES

P

04/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date