

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000074591

**FILED**  
**Feb 29, 2012**  
**Secretary of State**

**Entity Name:** MASTERSPRAY OF ORLANDO, INC.

**Current Principal Place of Business:**

10151 UNIVERSITY BLVD,  
SUITE577  
ORLANDO, FL 32817

**New Principal Place of Business:**

**Current Mailing Address:**

10151 UNIVERSITY BLVD,  
SUITE577  
ORLANDO, FL 32817

**New Mailing Address:**

**FEI Number:** 27-0886672

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MILAN, LANA  
10151 UNIVERSITY BLVD  
SUITE 577  
ORLANDO, FL 32817 US

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

MILAN, CHAD  
10151 UNIVERSITY BLVD  
SUITE 577  
ORLANDO, FL 32817 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:** CHAD MILAN

02/29/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** MILAN, CHAD  
**Address:** 10151 UNIVERSITY BLVD SUITE 577  
**City-St-Zip:** ORLANDO, FL 32817

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:** CHAD MILAN

P

02/29/2012

Electronic Signature of Signing Officer or Director

Date