

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000097242

Entity Name: SCH PLASTERING INC.

FILED  
Apr 28, 2006  
Secretary of State

## Current Principal Place of Business:

4861 NW 8TH DR.  
PLANTATION, FL 33317

## New Principal Place of Business:

## Current Mailing Address:

4861 NW 8TH DR.  
PLANTATION, FL 33317

## New Mailing Address:

FEI Number: 65-0877551

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ST. HILAIRE, ANTOINE  
4861 NW 8TH DR.  
PLANTATION, FL 33317 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: ST HILAIRE, EMMANUEL  
Address: 5066 ISLAND CLUB DR  
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: P ( ) Delete  
Name: ST HILAIRE, ANTOINE  
Address: 4861 N W 8TH DR  
City-St-Zip: PLANTATION, FL 33317

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ANTOINE ST.HILAIRE

PRES

04/28/2006

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

\_\_\_\_\_  
Date