

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S84099

FILED  
Jan 17, 2007  
Secretary of State

Entity Name: R & G PLASTERING, INC.

**Current Principal Place of Business:**

115 W OLYMPIA AVE  
STE111  
PUNTA GORDA, FL 33950 US

**New Principal Place of Business:**

**Current Mailing Address:**

115 W OLYMPIA AVE  
STE 111  
PUNTA GORDA, FL 33950 US

**New Mailing Address:**

FEI Number: 65-0294608      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GOMES, ROBERT L  
8512 ALAN BLVD.  
PUNTA GORDA, FL 33982 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: PSD ( ) Delete  
Name: GOMES, ROBERT,  
Address: 8512 ALAN BLVD  
City-St-Zip: PUNTA GORDA, FL 33982

Title: DT ( ) Delete  
Name: GOMES, TAMRA  
Address: 8512 ALAN BLVD  
City-St-Zip: PUNTA GORDA, FL 33982

**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: ROBERT GOMES

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01/17/2007

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

\_\_\_\_\_ Date