

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000070767

FILED
Jan 28, 2005
Secretary of State

Entity Name: JAMES KUCHARZAK PAINTING, INC.

Current Principal Place of Business:

3649 RECREATION LANE
NAPLES, FL 34116

New Principal Place of Business:

9977 TREASURE CAY LN
BONITA SPRINGS, FL 34135

Current Mailing Address:

3649 RECREATION LANE
NAPLES, FL 34116

New Mailing Address:

9977 TREASURE CAY LN
BONITA SPRINGS, FL 34135

FEI Number: 74-3115430

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUCHARZAK, JAMES M
3649 RECREATION LANE
NAPLES, FL 34116 US

Name and Address of New Registered Agent:

KUCHARZAK, JAMES M
9977 TREASURE CAY LN
BONITA SPRINGS, FL 34135 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: JAMES M KUCHARZAK

01/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KUCHARZAK, JAMES M
Address: 3649 RECREATION LANE
City-St-Zip: NAPLES, FL 34116

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KUCHARZAK, JAMES M
Address: 3649 RECREATION LANE
City-St-Zip: NAPLES, FL 34116 US

Title: S () Change (X) Addition
Name: OLIVARES, CARLOS G
Address: 10119 SANDY HOLLOW LN APT 306
City-St-Zip: BONITA SPRINGS, FL 34135 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES M KUCHARZAK

P

01/28/2005

Electronic Signature of Signing Officer or Director

Date