

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000052707

FILED
Feb 08, 2009
Secretary of State

Entity Name: PICTURE PERFECT PROPERTY MAINTENANCE OF THE TREASURE COAST, INC.

Current Principal Place of Business:

883 N.E. DIXIE HWY.
SUITE 1
JENSON BEACH, FL 34957

New Principal Place of Business:

Current Mailing Address:

883 N.E. DIXIE HWY.
SUITE 1
JENSON BEACH, FL 34957

New Mailing Address:

FEI Number: 56-2447397 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KRIVANEK 11, JACK E V. PRES
883 NE DIXIE HWY
SUITE 1
JENSEN BEACH, FL 34957 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: KRIVANEK, KAY M
Address: 883 N.E. DIXIE HWY.
City-St-Zip: JENSON BEACH, FL 34957

Title: VTD () Delete
Name: KRIVANEK, JACK II
Address: 883 N.E. DIXIE HWY.
City-St-Zip: JENSON BEACH, FL 34957

Title: SEC () Delete
Name: KRIVANEK, KAY M
Address: 883 N.E. DIXIE HWY.
City-St-Zip: JENSEN BEACH, FL 34957

Title: TREA () Delete
Name: KRIVANEK, JACK E
Address: 883 N. E. DIXIE HWY
City-St-Zip: JENSEN BEACH, FL 34957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: JACK KRIVANEK

VTD

02/08/2009

Electronic Signature of Signing Officer or Director

_____ Date