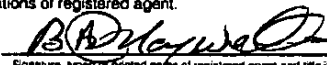
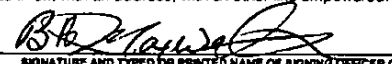


2006 FOR PROFIT CORPORATION ANNUAL REPORT

1/20/2006-90035-039-\$8.75-\$8.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 FEB 24 PM 4:34

DOCUMENT # P99000039501			
1. Entity Name FIRST CHOICE PAINTING INC			
Principal Place of Business FIRST CHOICE PAINTING 8457 SHERATON DRIVE MIRAMAR, FL 33025		Mailing Address FIRST CHOICE PAINTING 8457 SHERATON DRIVE MIRAMAR, FL 33025	
2. Principal Place of Business 1817 Pace DR NW Suite, Apt. #, etc.		3. Mailing Address Po Box 110807 Suite, Apt. #, etc.	
City & State Palm Bay FL		City & State Palm Bay FL	
Zip 32907	Country Palm Bay	Zip 32907	Country Brevard
4. FEI Number 65-0930806		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MAXWELL, BARRINGTON 8457 SHERATON DR MIRAMAR, FL 33025		7. Name and Address of New Registered Agent Name First Choice Painting & Fencing Street Address (P.O. Box Number is Not Acceptable) 1817 Pace DR NW City Palm Bay FL Zip Code 32907	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, of both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE  DATE 1/16/06 Signature, typewritten or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MAXWELL, BARRINGTON 8457 SHERATON DR. MIRAMAR, FL 33025 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MAXWELL, ELFREDA 8457 SHERATON DR MIRAMAR, FL 33025 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:  BARRINGTON MAXWELL SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 1/16/06 Online Filing # 3214800219			

2/24/06

ATTACHMENT

~~#P99000 039501~~

FIRST CHOICE PAINTING

P O Box 110807

Palm Bay, FL 32907

40004212

2/2

17 January 2006

Division of Corporations
P O Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

RE: Reference number P99000039501

I would like to draw your attention to the fact that the payment that was submitted was not returned, I assume you will be holding the check until you receive the updated information you requested to complete archiving.

Here is my business address:

1817 Pace Drive NW
Palm Bay, FL 32907

My mailing address is:

P O Box 110807
Palm Bay, FL 32907

Please use the check that was sent with the previous documents for the 2006 annual report. Any questions or concerns, please call 321-676-3382 or 321-480-0819.

Thank you

Barrington Maxwell

