

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 20, 2007 08:00 AM
Secretary of State

DOCUMENT # G69561

1. Entity Name
PAINT PLACE, INC.



Principal Place of Business
% CHARLES ODORISIO, JR.
22765 STATE RD. 7
BOCA RATON, FL 33428-5427

Mailing Address
% CHARLES ODORISIO, JR.
22765 STATE RD. 7
BOCA RATON, FL 33428-5427



03142007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2331386

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ODORISIO, CHARLES, JR.
22765 STATE RD. 7
BOCA RATON, FL

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE Charles Odorisio, Jr.
Signature typed or printed name of registered agent and office, if applicable

(NOTE: Registered Agent signature required when reinstating)

3/16/07

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ODORISIO, CHARLES JR.
STREET ADDRESS	935 N.W. 110TH LANE
CITY-STATE-ZIP	CORAL SPRINGS, FL
TITLE	STD
NAME	ODORISIO, JUNE C.
STREET ADDRESS	935 N.W. 110TH LANE
CITY-STATE-ZIP	CORAL SPRINGS, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

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03/29/07-80042-012 158.75

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IN THIS SPACE**

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: Charles Odorisio, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #