2006 FOR PROFIT CORPORATION

of the corporation or the receiver or ruste changed, or on an attachment with in ad-

SIGNATURE: 1

Feb 16, 2006 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT #303111** 02-16-2006 90056 010 ***150 00 1. Entity Name ATLANTIC PLASTERING, INC. quv + -Principal Place of Business Mailing Address P: 0. BOX 667 P-0-BOX 667-240 W. JUNO ST. 249 W. IUNO ST. JUPITER FL 33468 JUPITER, FL-33450 3. Mailing Address 2 48 W. 2. Principal Place of Business st. 248 W. JUND St JUNO Suite, Apt. #, etc. 01062006 Cha-P CR2E034 (11/05) City & State Jupiter City & State 4. FEI Number Applied For FLA Jupiter 59-1117393 Not Applicable CountryUSA \$8.75 Additional 5. Certificate of Status Desired 458 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WILLIAM J. BOSSO, JR BOSSO, WILLIAM J Street Address (P.O. Box Number is Not Acceptable) 2428 BROADWAY WEST PALM BEACH, FL 33404 BEACH 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, typed or printed name of registered agent (NOTE: Registered Agent signature reduked when reinstating) 9. Election Campaign Financing \$5.00 мау Ве FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Сhange TITLE Delete ■ Addition FONING; ARGHIE FUR NAME NAME 210 COLONY WAY WEST STREET ADDRESS STREET ADDRESS JUPITER, FL 33458 CITY-ST-ZIP CITY-ST-ZIP PRESIDENT/SECRETARY/DIRECTORY Change ROBERT J. TUNING 248 W. JUNO STREET Delete TITLE TUNING, ROBERT J. NAME NAME 5408 SIOUX 6T STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JUPITER, FL-93458 CITY-ST-ZIP -sp Delete TITLE Change ☐ Addition HAIZLIP, CORNELIA A-NAME NAME STREET ADDRESS 4829 TEQUESTA DR. STREET ADDRESS CITY-ST-ZIP JUPITER, FL 33469 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 in the end accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the receiver or yousted to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

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