


Mar. 14. 2006 10:53AM SUPPLASTERING, INC

11:26 AM 3/2

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2006 08:00 AM
Secretary of State

DOCUMENT # 641894 1. Entry Name BERNARDO OLCZYK, CORPORATION	
---	--

Principal Place of Business 288 NE 2ND STREET MIAMI, FL 33132-2213	Maining Address 288 NE 2ND STREET MIAMI, FL 33132-2213
--	--

DO NOT WRITE IN THIS SPACE



03142006 No Chg-P CR2EL3A (11/05)

4. Filing Number 59-1944501	Applied For NOT APPLICABLE
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

OLCZYK, BERNARDO
4225 N MERIDIAN AVE
MIAMI BEACH, FL 33140

DO NOT WRITE 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 _____
Signature of individual or authorized representative of registered agent and state if applicable

NOTE: Registered agent signature required when the state of _____
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Excluded Campaign Financing Total Fund Contribution **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PO OLCZYK, BERNARDO 4225 N. MERIDIAN AVENUE MIAMI BEACH, FL 33140
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	

DO NOT WRITE IN THIS SPACE

0000001473920
04/04/06-80003-002 150.00

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. I am an officer or director of the corporation or the register or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in S-Box 10 or Block 11 if changed, or on an attachment with an address, with a power of attorney.

SIGNATURE: *Bernardo Olyk Pres* 3-14-06 (305) 318244
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR