2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Feb 07, 2005 8:00 am Secretary of State DOCUMENT # G76317 02-07-2005 90042 023 ***150.00 PEDRERO PAINTING, INC. Principal Place of Business Mailing Address 3121 VESPER AVENUE. 3121 VESPER AVENUE 40012874 SARASOTA, FL 34232 SARASOTA, FL 34232 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01312005 CR2E034 (10/03) Chg-P Applied For City & State City & State 4. FEI Number 59-2353539 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required -- 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PEDRERO, RAYMOND Street Address (P.O. Box Number is Not Acceptable) 3121 VESPER AVENUE SARASOTA, FL 34232 City Zip Code 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 and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1,-2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PD Change TITLE TITLE ☐ Addition ☐ Delete RAYMOND PEDRERO 3121 Vesper AVE. PEDRERO, RAYMOND NAME NAME STREET ADDRESS 3958 SO. SHADE AVE. STREET ADDRESS SARASOTA, FL 34231 CITY-ST-ZIP CHTY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Delete Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-S1-ZIP CITY-ST-ZIP Delete Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZiP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(I). 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: /

FILED