

FILED
Jan 17, 2006 8:00 am
Secretary of State

01-17-2006 90228 036 ***150.00

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J53502 1. Entity Name MANOLIS PAINTERS, INC.					
Principal Place of Business 2908 47TH AVE S WEST PALM BEACH, FL 33415			Mailing Address 2908 47TH AVE S WEST PALM BEACH, FL 33415		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-2751379	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent MANOLIS, BILL 2908 47TH AVENUE SOUTH WEST PALM BEACH, FL 33415				7. Name and Address of New Registered Agent Name MANOLIS VASILIOS Street Address (P.O. Box Number is Not Acceptable) 2908 47TH AVENUE SOUTH City WEST PALM BEACH FL Zip Code 33415	
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 _____ DATE _____ (Signature, typed or printed name of registered agent and fee if applicable) (Typed Name, Registered Agent signature required when changing) (DATE)					
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	D MANOLIS, BILL 2908 47TH AVE S W PALM BEACH, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	D MANOLIS VASILIOS 2908 47th Ave. S W.P.B FL. 33415	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D MANOLIS, JOHN 2685 STARWOOD CDT WEST PALM BEACH, FL 33406	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	T HARISIS MANOLIS 2908 47th Ave S W.P.B FL. 33415	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D MANOLIS, JOHN 2685 STARWOOD CDT WEST PALM BEACH, FL 33406	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	S THEODORE MANOLIS 2908 47th Ave. S W.P.B FL. 33415	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D MANOLIS, JOHN 2685 STARWOOD CDT WEST PALM BEACH, FL 33406	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	T HARISIS MANOLIS 2908 47th Ave S W.P.B FL. 33415	☐ Change ☒ Addition
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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.