2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Jan 27, 2005 08:00 AM Secretary of State **DOCUMENT # P00000035801** 1. Entity Name LUIS A. SIERRA PAINTING, INC. Principal Place of Business Mailing Address 5751 SW 59 PLACE 5751 SW 59 PLACE MIAMI, FL 33143 MIAMI, FL 33143 01132005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0999374 Not Applicable \$8,75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE SIERRA, LUIS A 5751 SW 59 PLACE MIAMI, FL 33143 IN THIS SPACE 3. 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 title if applicable. (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE SIERRA, LUIS A तिविविविधा प्राप्ता पुर NAME STREET ADDRESS 5751 SW 59 PLACE 0:727/05-80042-009 150.00 CITY-ST-ZIP MIAMI, FL 33143 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-21P TITLE NAME STREET ADDRESS CITY-ST-7IP ··- ··- · TITLE NAME

12. I hereby certify that the information supplied with this filling 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 files empowered.

STREET ADDRESS CITY-ST-ZIP

> yen SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-479-3146

Daytime Prigne #