



2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2005 08:00 AM
Secretary of State

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| DOCUMENT # P00000068908 |  |
| 1. Entity Name MARQUEZ PAINTING, INC. | |

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|--|--|
| Principal Place of Business 12601 S.W. 264TH ST. MIAMI, FL 33032 | Mailing Address P.O. BOX 771441 MIAMI, FL 33177-0025 |
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DO NOT WRITE IN THIS SPACE

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|  | |
| 01032005 | No Chg-P CR2E034 (10/03) |
| 4. FEI Number 65-1035773 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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|--|--|
| 6. Name and Address of Current Registered Agent | |
| MARQUEZ, FRANCISCO 11872 SW 185 TERR MIAMI, FL 33177 | |

**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 _____ | (NOTE: Registered Agent signature required when reinstating) | DATE _____ |
|-----------------|--|------------|

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
|---|---|

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DP MARQUEZ, FRANCISCO 12601 S.W. 264TH ST. MIAMI, FL 33032 |
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01/12/05-80006-005 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <u>Francisco Marquez</u> | <u>(305) 300 5562</u> |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date Daytime Phone # |