


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Sep 08, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P01000003191**  
 1. Entity Name  
**ABSOLUTE PAINTING BY OSCAR, INC.**



Principal Place of Business 14500 S.W. 280TH STREET #293 HOMESTEAD, FL 33032	Mailing Address P.O. BOX 924636 HOMESTEAD, FL 33092-4636
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**DO NOT WRITE IN THIS SPACE**



09062005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1065116	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
 DONOSO, OSCAR F  
 14500 S.W. 280TH STREET #293  
 HOMESTEAD, FL 33032

**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 \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 7, 2005**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD DONOSO, OSCAR 14500 S.W. 280TH STREET #293 HOMESTEAD, FL 33032
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 09/08/05-80001-007 150.00

**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:  **OSCAR DONOSO - PRES** 09/06/05 (205) 796-4075  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #