2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Apr 24, 2006 08:00 AM Secretary of State DOCUMENT # P01000016238 1. Entity Name GEORGE ARIAS PAINTING CONTRACTORS INC. Principal Place of Business Mailing Address 14502 SW 92ND COURT 14502 SW 92ND COURT MIAMI FL 33176 MIAMI FL 33176 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State Applied For City & State 4. FEI Number 65-0090427 Not Applicab 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 Name ARIAS, GEORGE Street Address (P.O. Box Number is Not Acceptable) 14502 SW 92ND COURT MIAMI FL 33176 City Zip Code 8. The above named epity 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. GEORGE ARIAS 4-15-06 SIGNATURE. Signature, typed or philited name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May B: After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE ☐ Change Admin' ☐ Delete ARIAS, GEORGE NAME NAME STREET ADDRESS 14502 SW 92ND COURT STREET ADDRESS City-SI-ZIP MIAMI FL 33176 CITY-ST-ZIP — U00000525984 05/04/06-80056-0¶6™¶5∪.¶6*** TITLE SD Delete TITLE NAME ARIAS, INES A NAME STREET ADDRESS STREET ADDRESS 14502 SW 92ND COURT CITY-ST-ZIP MIAMI FL 33176 CITY-ST-ZIP THLE Delete TITLE ☐ Change □ Ad (2) NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY - ST - ZIP TITLE Defete TITLE ☐ Change ☐ Arkett NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CATY-ST-ZIP TITLE Delete TITLE Change April April 2 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP INF ☐ Delete Till F ☐ Change Addi. NAME MAME 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 exemptions contained in Section 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 frustee 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.

GEORGE ARIAS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: