2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 16, 2005 08:00 AM DOCUMENT # P01000033908 **Secretary of State** 1. Entity Name KENT HOVIOUS PAINTING INC. Principal Place of Business . , . Mailing Address 215 WHITE CLIFF BLVD. 215 WHITE CLIFF BLVD. AUBURNDALE, FL 33823 AUBURNDALE, FL 33823 CR2E034 (10/03) 03082005 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3718156 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent HOVIOUS, KENT S DO NOT WRITE 215 WHITE CLIFF BLVD. AUBURNDALE, FL 33823 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. (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE HOVIOUS, KENT S NAME STREET ADDRESS 215 WHITE CLIFF BLVD AUBURNDALE, FL 33823 CITY-ST-ZIP 000000264411 03/16/05-80013-014 150.00 VPD TITLE HOVIOUS, DEANNA NAME 215 WHITE CLIFF BLVD STREET ADDRESS CLTY-ST-ZIP AUBURNDALE, FL 33823 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing 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 like empowered.

FILED