


**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000048815 1. Entity Name JESUS' PAINTING, INC.		
Principal Place of Business 6122 CLEVELAND ST. #3 HOLLYWOOD, FL 33024		Mailing Address 6122 CLEVELAND ST. #3 HOLLYWOOD, FL 33024
2. Principal Place of Business <i>5770 Lakeside Drive # 817</i>		3. Mailing Address <i>5770 Lakeside Drive # 817</i>
Suite, Apt. #, etc.		Suite, Apt. #, etc.
City & State MARGATE FL		City & State
Zip 33063	Country	Zip Country
5. Name and Address of Current Registered Agent GARZA, JESUS A 6122 CLEVELAND ST. #3 HOLLYWOOD, FL 33024		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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: <i>Jesus A Garza</i> DATE: <i>3/25/03</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)</small>		
FILE NOW! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GARZA, JESUS 6122 CLEVELAND ST #3 HOLLYWOOD, FL 33024	P GARZA, Jesus 5770 Lakeside Dr # 817 MARGATE FL 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete <input type="checkbox"/>	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete <input type="checkbox"/>	Change <input type="checkbox"/> Addition <input type="checkbox"/>
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete <input type="checkbox"/>	Change <input type="checkbox"/> Addition <input type="checkbox"/>
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.		
SIGNATURE: <i>Jesus A Garza</i> DATE: <i>3/25/03 (9.54) 4449245</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Name Daytime Phone

CR2E034 (10/02)