## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000073642

FILED Apr 21, 2005 Secretary of State

Entity Name: PERRY WARE PAINTING CONTRACTORS, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:		
	STRATFORD Y, FL 34990	WAY			
Current Mailing Address:		New Mailing Address:			
PO BOX 4 PALM CIT	3 Y, FL 349910	043			
FEI Number	: 65-1094094	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
MADE DE	ERRY D				
1857 SW S PALM CIT The above	STRATFORD Y, FL 34990 named entity	US	ourpose of changing its registered	d office or registered agent, or both,	
1857 SW SPALM CIT	STRATFORD Y, FL 34990 named entity e of Florida.	US	ourpose of changing its registered	d office or registered agent, or both,	
1857 SW S PALM CIT The above	STRATFORD Y, FL 34990 named entity of Florida.	US submits this statement for the μ		d office or registered agent, or both,	
1857 SW SPALM CIT The above in the State	STRATFORD Y, FL 34990 named entity e of Florida. RE: Electro	US			
1857 SW SPALM CIT  The above in the State  SIGNATUR  Election Car	STRATFORD Y, FL 34990 named entity e of Florida. RE: Electro	US submits this statement for the particle of Registered Age agreed Trust Fund Contribution ( ).	ent		
1857 SW SPALM CIT  The above in the State  SIGNATUR  Election Car	STRATFORD Y, FL 34990 e named entity e of Florida.  RE: Electro mpaign Financir S AND DIREC  D/P WARE, PERR	US submits this statement for the prince Signature of Registered Age og Trust Fund Contribution ( ). CTORS: ) Delete Y D ATFORD WAY	ent	Date	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROL JO WARE V 04/21/2005