

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000077426

Entity Name: PAINTING CONCEPTS, INC.

FILED
Jun 11, 2008
Secretary of State

Current Principal Place of Business:

3459 HIGH RIDGE ROAD
BOYNTON BEACH, FL 33426

New Principal Place of Business:

Current Mailing Address:

6365 SHADOW CREEK VILLAGE CIRCLE
LAKE WORTH, FL 33463

New Mailing Address:

FEI Number: 65-1129629

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JIMENEZ, ADEL
6365 SHADOW CREEK VILLAGE CIRCLE
LAKE WORTH, FL 33463 US

Name and Address of New Registered Agent:

ALL FLORIDA FIRM, INC.
813 DELTONA BLVD.
STE. A
DELTONA, FL 32725 US

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.

SIGNATURE: CHRISTINA CLARK FOR ALL FLORIDA FIRM, INC.

06/11/2008

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PR () Delete
Name: JIMENEZ, ADEL
Address: 6365 SHADOW CREEK VILLAGE CIRCLE
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CHRISTINA CLARK FOR ADEL JIMENEZ

PR

06/11/2008

Electronic Signature of Signing Officer or Director

Date