



**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 17, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P01000096201</b>			
1. Entity Name VINCE CORRADO PRESSURE CLEANING & PAINTING, INC.			
Principal Place of Business 469 PALM RIVER BLVD NAPLES, FL 34110	Mailing Address 469 PALM RIVER BLVD NAPLES, FL 34110		
<b>DO NOT WRITE IN THIS SPACE</b>			
		01312005 No Chg-P CR2E034 (10/03)	
		4. FEI Number 59-3750056	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  CORRADO, VINCE 469 PALM RIVER BLVD NAPLES, FL 34110		<b>DO NOT WRITE IN THIS SPACE</b>	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		<b>DO NOT WRITE IN THIS SPACE</b>  U00000267299 03/17/05-80064-018 150.00	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP CORRADO, VINCE 469 PALM RIVER BLVD NAPLES, FL 34110		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV CORRADO, ADRIANA 469 PALM RIVER BLVD NAPLES, FL 34110		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
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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.			
SIGNATURE: <u>Vince Corrado</u>		3-15-05 (239) 597-7722	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	