

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000107677

Entity Name: NAPOLI PAINT WORKS, INC.

FILED  
Apr 19, 2005  
Secretary of State

## Current Principal Place of Business:

6246 TOWN CTR CIR  
NAPLES, FL 34119

## New Principal Place of Business:

33 MADISON DR.,  
NAPLES, FL 34110

## Current Mailing Address:

6246 TOWN CTR CIR  
NAPLES, FL 34119

## New Mailing Address:

33 MADISON DR.,  
NAPLES, FL 34110

FEI Number: 59-3754366

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BIANCANIELLO, MINO  
6246 TOWN CTR CIR  
NAPLES, FL 34119 US

## Name and Address of New Registered Agent:

BIANCANIELLO, MINO  
33 MADISON DR.,  
NAPLES, FL 34110 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: MINO BIANCANIELLO

04/19/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: BIANCANIELLO, MINO  
Address: 6246 TOWN CTR CIR  
City-St-Zip: NAPLES, FL 34119

Title: V ( ) Delete  
Name: BIANCANIELLO, SILVANA  
Address: 6246 TOWN CTR CIR  
City-St-Zip: NAPLES, FL 34119

Title: VP ( ) Delete  
Name: LOPEZ, JOSE  
Address: 2646 TOWN CTR CIR  
City-St-Zip: NAPLES, FL 34116

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: BIANCANIELLO, MINO  
Address: 33 MADISON DR.,  
City-St-Zip: NAPLES, FL 34110

Title: V (X) Change ( ) Addition  
Name: BIANCANIELLO, SILVANA  
Address: 33 MADISON DR.,  
City-St-Zip: NAPLES, FL 34110

Title: VP (X) Change ( ) Addition  
Name: LOPEZ, JOSE  
Address: 33 MADISON DR.,  
City-St-Zip: NAPLES, FL 34110

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: MINO BIANCANIELLO

PSTD

04/19/2005

Electronic Signature of Signing Officer or Director

Date