

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 21, 2005 8:00 am**  
**Secretary of State**

02-21-2005 90063 023 \*\*\*150.00

40020779



<b>DOCUMENT # P01000116653</b> 1. Entity Name "J & G FLORIDA PAINTING, CORP."			
Principal Place of Business 7615 NW 68TH WAY FT LAUDERDALE, FL 33321		Mailing Address 7615 NW 68TH WAY FT LAUDERDALE, FL 33321	
2. Principal Place of Business 11225 W. ATLANTIC BLVD Suite, Apt. #, etc. Apt I 105 City & State Coral Springs Zip 33071		3. Mailing Address 11225 W. ATLANTIC BLVD Suite, Apt. #, etc. Apt I 105 City & State Coral Springs Zip 33071	
4. FEI Number 65-1159187		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  ZAPATA, MARA 9139 NW 117TH STREET HIALEAH, FL 33018		7. Name and Address of New Registered Agent Name <b>JEFFREY A. BARRIOS</b> Street Address (P.O. Box Number is Not Acceptable) 11225 W. ATLANTIC BLVD City <b>Coral Springs</b> <b>FL</b> Zip Code <b>33071</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  DATE <b>2-05-05</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PD NAME BARRIOS, JEFFREY A STREET ADDRESS 7615 NW 68TH WAY CITY - ST - ZIP FT LAUDERDALE, FL 33321	<input type="checkbox"/> Delete	TITLE PD NAME Barrios, JEFFREY A STREET ADDRESS 11225 W ATLANTIC BLVD Apt I 105 CITY - ST - ZIP Coral Springs FL 33071	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VD NAME CHAVARRO, GLADYS N STREET ADDRESS 7615 NW 68TH WAY CITY - ST - ZIP FT LAUDERDALE, FL 33321	<input type="checkbox"/> Delete	TITLE VP NAME gladys N Chavarro STREET ADDRESS 11225 W. ATLANTIC BLVD Apt I 105 CITY - ST - ZIP Coral Springs FL 33071	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:		Date: <b>2-05-04</b>	