## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 13, 2006 08:00 AM DOCUMENT # P01000118542 Secretary of State **BOCA RIDGE PAINT & MORE, INC.** Principal Place of Business Mailing Address 9298 SABLE RIDGE CIRCLE #6-B 9298 SABLE RIDGE CIRCLE #6-8 BOCA RATON, FL 3342B BOCA RATON, FL 33428 04102006 1 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 01-0553125 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HERNANDEZ, DAVID O DO NOT WRITE 9298 SABLE RIDGE CIR IN THIS SPACE BOCA RATON, FL 33428 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 Florids, I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicably DATE (NOTE: Registered Agent signature required when reinstaling) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 13. OFFICERS AND DIRECTORS PD TITLE HERNANDEZ, DAVID O NAME 9298 SABLE RIDGE CIRCLE #6-B STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33428 TITLE HERNANDEZ, MARIE L STREET ADDRESS 9298 SABLE RIDGE CIRCLE #6-B CITY-ST-ZIP **BOCA RATON, FL 33428** TITLE HAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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: Hand Hours AND NO

CITY-SI-ZIP
TITLE
NAME
STREET ADDRESS

4/10/06

FILED

561-445-7814