

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 23, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P02000003016**

1. Entity Name  
**A & E PRESSURE CLEANING & PAINTING, INC.**



Principal Place of Business 4912 GEORGE AVE. SARASOTA, FL 34233	Mailing Address 4912 GEORGE AVE. SARASOTA, FL 34233
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**DO NOT WRITE IN THIS SPACE**



07122004 No Chg-P CR2E034 (10/03)

4. FEI Number 03-0457057	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MENENDEZ, ALBERT JR**  
**4912 GEORGE AVE.**  
**SARASOTA, FL 34233**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MENENDEZ, ALBERT M JR 4912 GEORGE AVE. SARASOTA, FL 34233
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HUNTER, RYAN 4912 GEORGE AVE. SARASOTA, FL 34233
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**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:** \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_