

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000037779

**FILED**  
**Apr 09, 2006**  
**Secretary of State**

**Entity Name:** FLORIDA STATE PAINTING & WALLCOVERING, "INC"

**Current Principal Place of Business:**

14716 GAINESBOROUGH CT.  
ORLANDO, FL 32826

**New Principal Place of Business:**

**Current Mailing Address:**

14716 GAINESBOROUGH CT.  
ORLANDO, FL 32826

**New Mailing Address:**

**FEI Number:** 48-1263944

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MAGNOTTI, PHILIP  
1671 RIVEREDGE RD.  
OVIEDO, FL 32765 US

**Name and Address of New Registered Agent:**

LAQUAGLIA, LISA  
14716 GAINESBOROUGH COURT  
ORLANDO, FL 32826 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: LISA LAQUAGLIA

04/09/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MAGNOTTI, PHILIP  
Address: 1671 RIVEREDGE RD.  
City-St-Zip: OVIEDO, FL 32765

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: LAQUAGLIA, LISA  
Address: 14716 GAINESBOROUGH COURT  
City-St-Zip: ORLANDO, FL 32826

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: LISA LAQUAGLIA

P

04/09/2006

Electronic Signature of Signing Officer or Director

Date