## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000079463

FILED Apr 14, 2007 Secretary of State

Entity Name: JAN HOLMSTED PAINTING & PRESSURE CLEANING, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	RAS CIRCLE I BEACH, FL	33437			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	RAS CIRCLE I BEACH, FL	33437			
FEI Number:	11-3662205	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current Registered Agent:	Name and Address	of New Registered Agent:	
3900 WOC	. & ASSOCIAT DDLAKE BLVD RTH, FL 3346	). SÚITE 212			
	named entity of Florida.	submits this statement for the pur	pose of changing its registere	ed office or registered agent, or both,	
SIGNATUF	RE:				
	Electron	nic Signature of Registered Agent		Date	
Election Can	nnaign Financin	g Trust Fund Contribution ( ).			
	iipaigii i iilailoiii	g Trast Faria Contribution ( ).			
OFFICERS	S AND DIREC		ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:	
OFFICERS Title: Name: Address: City-St-Zip:	S AND DIREC	TORS: ) Delete AN CIRCLE	ADDITIONS/CHANG Title: Name: Address: City-St-Zip:	EES TO OFFICERS AND DIRECTORS:  ( ) Change ( ) Addition	
Title: Name: Address:	P ( HOLMSTED, JA 6306 MADRAS BOYNTON BEA	TORS:  ) Delete AN  CIRCLE ACH, FL 33437  ) Delete AURA CIRCLE	Title: Name: Address:		
Title: Name: Address: City-St-Zip: Title: Name: Address:	P (HOLMSTED, JAMES BOYNTON BEAUTH OF STATE OF ST	Delete AN CIRCLE ACH, FL 33437  Delete AURA CIRCLE ACH, FL 33437  Delete ACH, FL 33437	Title: Name: Address: City-St-Zip: Title: Name: Address:	( ) Change ( ) Addition	

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: JAN HOLMSTED P 04/14/2007