

**FILED**

**May 04, 2006 08:00 AM**  
Secretary of State

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT # P02000091293	
1. Entity Name FPD PAINTING CORP.	



Principal Place of Business 12420 SW 96 ST MIAMI, FL 33186	Mailing Address 12420 SW 96 ST MIAMI, FL 33186
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04282006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 11-3650248	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  GONZALEZ, FIDEL 12420 SW 96 ST MIAMI, FL 33186	
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**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: Dina Gonzalez vice president DATE: 05/2/06

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when recasting)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P GONZALEZ, FIDEL 12420 SW 96 ST MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V GONZALEZ, GINA 12420 SW 96 ST MIAMI, FL 33186
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05/19/06-80093-022 158.75

12. I hereby certify that the information supplied with this filing 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: Dina Gonzalez DATE: 05/02/06 Daytime Phone #: 786 3440671

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR