## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000096107

Entity Name: ORIGINAL PAINTING, CORP.

FILED May 02, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

P.O. BOX 11986-34101 4607 4TH STREET WEST NAPLES, FL 34101 LEHIGH ACRES, FL 33971

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 11986-34101 4607 4TH STREET WEST NAPLES, FL 34101 LEHIGH ACRES, FL 33971

FEI Number: 03-0480835 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:

SEIJAS, LUIS SEIJAS, LUIS 11057 WINDSONG CIRCLE 4607 4TH STREET WEST APT 102 LEHIGH, FL 33971 NAPLES, FL 34109 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: LUIS SEIJAS 05/02/2006

> Electronic Signature of Registered Agent Date

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

Election Campaign Financing Trust Fund Contribution ( ). ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

Title: ( ) Delete Title: (X) Change ( ) Addition

SEIJAS, LUIS Name: Name: SEIJAS, LUIS

11057 WINDSONG CIRCLE APT 102 Address: 4607 4TH STREET WEST Address: City-St-Zip: NAPLES, FL 34109 City-St-Zip: LEHIGH ACRES, FL 33971

Title: Title: () Delete () Change () Addition

HERNANDEZ, FREDY Name: Name: 11057 WINDSONG CIRCLE APT 102 Address: Address: NAPLES, FL 34109 City-St-Zip: City-St-Zip:

Title: Title: ( ) Delete (X) Change ( ) Addition

QUEA, KELLY Name: QUEA, KELLY Name:

11057 WINDSONG CIRCLE APT 102 4607 4TH STREET WEST Address Address: City-St-Zip: NAPLES, FL 34109 City-St-Zip: LEHIGH ACRES, FL 33971

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: LUIS SEIJAS 05/02/2006 D