
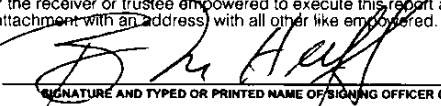


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 03, 2007 8:00 am**  
**Secretary of State**

08-03-2007 90019 009 \*\*\*150.00

<b>DOCUMENT # P02000106221</b> 1. Entity Name <b>STATEWIDE PAINTING &amp; PRESSURE CLEANING, INC.</b>					
Principal Place of Business <b>28731 S CARGO #3</b> <b>BONITA SPRINGS, FL 34135</b>			Mailing Address <b>28731 S CARGO #3</b> <b>BONITA SPRINGS, FL 34135</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <b>PO Box 1597</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State <b>BONITA SPRINGS</b>		4. FEI Number <b>52-2379490</b>	
Zip		Country <b>34133</b>		Country <b>US</b>	
6. Name and Address of Current Registered Agent <b>SOUTHWEST PROFESSIONAL SERVICES OF SO. FL</b> <b>13571 MCGREGOR BLVD., STE. #22</b> <b>FT. MYERS, FL 33919</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>Due by September 14, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be</b> <b>Added to Fees</b>	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>P</b> <b>HELFF, BARRY</b> <b>212 MONTEREY DR</b> <b>NAPLES, FL 34119</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>V</b> <b>HELFF, MICHAEL</b> <b>8545 SILK OAK LANE</b> <b>NAPLES, FL 34119</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>T</b> <b>HELFF, RANDI</b> <b>212 MONTEREY DR</b> <b>NAPLES, FL 34119</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>S</b> <b>HELFF, DEBRA</b> <b>8545 SILK OAK LANE</b> <b>NAPLES, FL 34119</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 employed.					
<b>SIGNATURE:</b> 			<b>7/31/07</b> <b>839 597-3749</b> <small>Date Daytime Phone #</small>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					