2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000009997

Entity Name: ISRAEL GONZALEZ PAINTING INC.

FILED Apr 29, 2005 Secretary of State

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

254 PRINGLE CIRCLE 5085 US HWY 17 SOUTH

APT D GREEN COVE SPRINGS, FL 32043 US

GREEN COVE SPRINGS, FL 32043 US

Current Mailing Address: New Mailing Address:

254 PRINGLE CIRCLE 5085 US HWY 17 SOUTH

APT D GREEN COVE SPRINGS, FL 32043 US

GREEN COVE SPRINGS, FL 32043 US

FEI Number: 61-1435767 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MERAZ, ADRIANA
254 PRINGLE CIRCLE
MERAZ, ADRIANA
5085 US HWY 17 SOUTH

APT D GREEN COVE SPRINGS, FL 32043 US

GREEN COVE SPRINGS, FL 32043 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: ADRIANA MERAZ 04/29/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: MERAZ, ADRIANA Name: MERAZ, ADRIANA

Address: 254 PRINGLE CIRCLE, APT. D Address: 5085 US HWY 17 SOUTH

City-St-Zip: GREEN COVE SPRINGS, FL 32043 City-St-Zip: GREEN COVE SPRINGS, FL 32043

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

 Name:
 GONZALEZ, ISRAEL
 Name:
 GONZALEZ, ISRAEL

 Address:
 254 PRINGLE CIRCLE, APT. D
 Address:
 5085 US HWY 17 SOUTH

City-St-Zip: GREEN COVE SPRINGS, FL 32043 City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: T () Delete Title: T (X) Change () Addition Name: ALMARAZ, SANTIAGO Name: ALMARAZ, SANTIAGO

Address: 254 PRINGLE CIRCLE. APT. D Address: 5085 US HWY 17 SOUTH

City-St-Zip: GREEN COVE SPRINGS, FL 32043 City-St-Zip: GREEN COVE SPRINGS, FL 32043

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ADRIANA MERAZ PRES 04/29/2005