2005 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P03000026392

DOUGLAS PAINTING, INC.



FILED Jan 06, 2005 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

1434 PURITAN ST DELTONA, FL 32725

1434 PURITAN ST DELTONA, FL 32725



01032005

No Chg-P

CR2E034 (10/03)

4. FEI Number 72-1545819 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

DIAZ, DOUGLAS A OWNER 1434 PURITAN ST DELTONA, FL 32725

SIGNATURE:

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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					
Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE					
FILE NOWII! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECT	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OWN DIAZ, DOUGLAS A OWNER 1434 PURITAN ST DELTONA, FL 32725				000000172696 01/06/05-80008-006 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OWN DIAZ, DOUGLAS A OWNER 1434 PURITAN ST DELTONA, FL 32725		-		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	OWN DIAZ, DOUGLAS A OWNER 1434 PURITAN ST DELTONA, FL 32725			IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OWN DIAZ, DOUGLAS A OWNER 1434 PURITAN ST DELTONA, FL 32725				
TITLE NAME STREET ADDRESS CITY-SI-ZIP	OWN DIAZ, DOUGLAS A OWNER 1434 PURITAN ST DELTONA, FL 32725				
12. I hereby certify that the information supplied with this filing does not qualify 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 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.					

IAME OF SIGNING OFFICER OR DIRECTOR