## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Mar 10, 2006 8:00 am Secretary of State **2/**1 DOCUMENT # P03000040733 02-16-2006 90046 036 \*\*\*150.00 DEPONTO PAINTING, INC. Principal Place of Business Maijing Address 66004569 1312 SE SECOND TERRACE 1312 SE SECOND TERRACE CAPE CORAL, FL 33990 CAPE CORAL, FL 33990 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/05) 02012006 City & State City & State 4. FEI Number Applied For 16-1660780 Not Applicable Zip Zio Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DEPONTO: CHRISTOPHIA-P Street Address (P.O. Box Number is Not Acceptable) 1312 S E 2ND TERRACE CAPE CORAL, FL 33904 Zip Code 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 agneture required when reinstang FILE NOWIL FEE IS \$150.00 . After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Delete TITLE ☐ Change Addition DEPONTO, CHRISTOPHER P NAME NAME STREET ADDRESS 1312 SE SECOND TERRACE STREET ADDRESS CITY-ST-ZIP CAPE CORAL, FL 33990 CITY-ST-ZIP TITI F Delete THILE ☐ Change ☐ Addition NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP - Dateta TITLE ☐ Chance ☐ Addition TITLE . HANGE NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE HALE NAME STREET ADDRESS STREET ADDRESS ι. CLTY-ST-ZIP CITY-ST-ZIP ME ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 logal effect as if made under eath; that I am an efficer 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 SIGNATURE:

**FILED** 



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 20, 2006

DEPONTO PAINTING, INC. 1312 SE SECOND TERRACE CAPE CORAL, FL 33990

Subject: **DEPONTO PAINTING, INC.** 

Reference Number:

P03000040733

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/JD ANNUAL REPORTS SECTION

Signatura 1.