2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 02, 2005 08:00 AM Secretary of State

DOCUMENT # P03000053875 1. Entity Name J.O. PAINTING, INC.					Secretary of State				
Principal Plan	e of Business	Mailing Address		· ·	1				
Principal Place of Business Mailing Address 257 SW 20 ROAD #16 257 SW 20 ROAD #16 MIAMI, FL 33129 MIAMI, FL 33129			6		 		11 Bris G ard Stor Ibili Terr i	BUKBBC 41 1891	
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01272005	Chg-P	CR2E034 (10/03)			
City & State		City & State		4. FEI Number 83-0358		·	opplied For Not Applicable		
Zip	Gountry	Zíp	Count	try	5. Certificate o	f Status Desired	□ \$8.75 Ac Fee Requir		
	6. Name and Address of Curren	t Registered Agent			7. Name and	Address of New R	egistered Agent		
51 41100	150110 144514	•		Name .	ame .				
BLANCO, JESUS MARIA 141 NE 3RD AVENUE STE #406				Street Address	(P.O. Box Number	is Not Acceptable	e)		
MIAMI, FL	33132								
				City			FL Zip Co		
8. The above	named entity submits this statement factors of registered agent.	or the purpose of changing its	s registere	ed office or registe	ered agent, or both	, in the State of Flo	orlda. I am familiar with	n, and accept	
ine obligati	along by registered agent.	Bl.		. 3			201	1	
SIGNATURE_	Signature, typed or printed name of registered agen	t and title if applicable. (NO	TF. Registerer	d Agent signature require	erf whon reinstation)		<u> </u>	05	
After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550	. 1			5.00 May Be ded to Fees	•	\$		
After Ma	ay 1, 2005 Fee will be \$550. OFFICERS AND	.00 Trust Fund Con	tribution.	□ Ād	ded to Fees	CHANGES TO OFF	ICERS AND DIRECTO		
After Ma	OFFICERS AND	.00 Trust Fund Con	11.	Ā	ded to Fees	HANGES TO OFF	ICERS AND DIRECTO	RS IN 11	
After Ma	ay 1, 2005 Fee will be \$550. OFFICERS AND	.00 Trust Fund Con	11. TITLE NAME	Ā	ded to Fees	U000:		☐ Addition	
After Ma	OFFICERS AND PD BLANCO, JESUS MARIA 141 NE 3RD AVENUE	.00 Trust Fund Con	11. TITLE NAME	Ad Ad	ded to Fees	U000:	□ Change 00358049	☐ Addition	
After Ma 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND PD BLANCO, JESUS MARIA 141 NE 3RD AVENUE	.00 Trust Fund Con D DIRECTORS ☐ Delete	11. TITLE NAME STREE CITY-	ET ADDRESS	ded to Fees	U000	□ Change 00358049 5 -8 0099-006	□ Addition 150.00	
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Thereby Certify that the information supplied with this iming 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.

10- - 1923

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DRECTOR

04/10/05 Date // 10/05