

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000087846

FILED
Jan 20, 2005
Secretary of State

Entity Name: NO BOUNDARIES PAINTING CORP.

Current Principal Place of Business:

600 RIVER BIRCH CT.
SUITE 325
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

600 RIVER BIRCH CT.
SUITE 325
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 20-0147232 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

QUEVEDO, CARLOS
600 RIVER BIRCH CT.
APT.325
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: QUEVEDO, CARLOS
Address: 600 RIVER BIRCH CT. APT#325
City-St-Zip: CLERMONT, FL 34711

Title: VD () Delete
Name: QUEVEDO, HENRY
Address: 2427 ACADEMY CIRCLE EAST APT#204
City-St-Zip: KISSIMMEE, FL 34744

Title: TD () Delete
Name: QUEVEDO, LUIS R
Address: 600 RIVER BIRCH CT. APT#614
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CARLOS QUEVEDO

PD

01/20/2005

Electronic Signature of Signing Officer or Director

_____ Date