2004 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P03000092276 02-16-2004 90043 016 ***155.00 AUGENSTEIN PAINTING PLUS, INC. Principal Place of Business Mailing Address 4317 81ST ST W 4317 81ST ST W BRADENTON, FL 34209 BRADENTON, FL 34209 MA 2. Principal Place of Business 3. Mailing Address 2708 26th Ave DR W Ave OR W 2708 26 Suite, Apt. #, etc. Suite, Apt. #, etc 02092004 Chg-P CR2E034 (10/03) City & State BRADENTON 4. FEI Number Applied For City & State BRADENTON, FL 20-0169456 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 34205 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ANDREW BRETT AUGENSTEIN AUGENSTEIN, ANDREW B Street Address (P.O. Box Number is Not Acceptable) 2708 26th Ave DR 4317 81ST ST W BRADENTON, FL 34209 Zip Code BRADENTON 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 HNOREW PRESIDENT HUGENSTEIN Signature, typed or printed name of registered agent and title if applical 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be প Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. Change - ☐ Addition TITLE Delete TITLE ANDREW BRETT AUGENSTEEN 2708 26th ave DR. W NAME AUGENSTEOM, ANDREW B NAME STREET ADDRESS 4317 81ST ST W STREET ADDRESS BRADENTON, FL 34205 CITY-ST-ZIP BRADENTON, FL 34209 CITY-ST-7IP Thange ■ Addition TITLE ☐ Delete TITLE Jacquelyn D AUGENSTEFN 2708 26th Ave OR W AUGENSTEIN, JACQUELYN D NAME NAME STREET ADDRESS 4317 81ST ST W STREET ADDRESS BRADENTON FL 34205 BRADENTON, FL 34209 CITY+ST-769 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP: CITY-ST-ZIP 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 thermy 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 condition 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. The adjugate like empoyees

FILED

Feb 16, 2004 8:00 am