2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000115783

1. Entity Name

JAN MIELECH PAINTING, INC.



FILED Jan 30, 2006 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

1931 WORTHINGTON DR. DELTONA, FL 32738 1931 WORTHINGTON DR. Deltona, FL 32738



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

01102006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0284513

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

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MIELECH, JAN J 1931 WORTHINGTON DR. DELTONA, FL 32738

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZiP DO NOT WRITE IN THIS SPACE

8. The above the obligati	named entity submits this statement for the purpose of changing its regis ons of registered agent.	stered office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable. (NOTE, Reg.	stered Agent signature required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00 9. Election Campaign F Trust Fund Contribution		000000407059 02/08/06-80001-007 158.75
10.	OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MIELECH, JAN J 1931 WORTHINGTON DR. DELTONA, FL 32738		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTS MIELECH, BARBARA 1931 WORTHINGTON DR. DELTONA, FL 32738		
TOLE Name Street address City-St-Zip		,	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN:	THIS SPACE

12. I hereby certify that the information supplied with this filling 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 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.

SIGNATURE: JID M MIRLE CH JEN MIELE CH 1-28-06 386-575-30
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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