2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000124315

Entity Name: A+ QUALITY PAINTING, INC.

PORT ST. LUCIE, FL 34952

City-St-Zip:

FILED Apr 22, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1671 SE CASCELLA COURT PORT ST. LUCIE, FL 34952 **Current Mailing Address: New Mailing Address:** 1671 SE CASCELLA COURT PORT ST. LUCIE, FL 34952 FEI Number: 80-0081810 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FOGT, THOMAS A ESQ 700 CÓLORADO AVENUE STUART, FL 34994 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: D/P/ () Delete () Change () Addition PIERCE, KRISTA L Name: Name: 1671 SE CASCELLA COURT Address: Address: City-St-Zip: PORT ST. LUCIE, FL 34952 City-St-Zip: Title: V/T () Delete Title: () Change () Addition Name: PIERCE, BERNARD S Name: 1671 SE CASCELLA CT Address: 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: KRISTA L. PIERCE D/P 04/22/2005