2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000131140

Entity Name: ATLANTIS PAINTING INCORPORATED

FILED Apr 14, 2007 Secretary of State

| , | | | | | | |
|---|---|---|---|---|-----------------------------------|--|
| Current Pr | incipal Place | of Business: | New Princ | New Principal Place of Business: | | |
| 5016 FAIRI LAKELAND | FAX EAST), FL 33813 | | 413 | 6445 S FLORIDA AVE. 413 LAKELAND, FL 33813 | | |
| Current Ma | ailing Addres | s: | New Maili | New Mailing Address: | | |
| POBOX 65 LAKELANE | 94), FL 33807 | | | | | |
| FEI Number: 06-1713424 FEI Number Applied For () FEI Number | | | FEI Number Not Appl | mber Not Applicable () Certificate of Status Desired () | | |
| Name and Address of Current Registered Agent: Na | | | | Name and Address of New Registered Agent: | | |
| NERAD, D. 5016 FAIRI LAKELAND | | US | | | | |
| The above in the State | | submits this statement for the pu | urpose of changing i | ts registered off | ice or registered agent, or both, | |
| SIGNATUR | RE: | | | | | |
| | Electror | ic Signature of Registered Ager | nt | | Date | |
| Election Can | npaign Financing | g Trust Fund Contribution (). | | | | |
| OFFICERS AND DIRECTORS: | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: | NERAD, BRENI 5016 FAIRFAX LAKELAND, FL | EAST 33813 US Delete A EAST | Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: | FORTE, RICHAR 140 GLENDALE LAKELAND, FL | ST APT 317 | |
| Title: Name: Address: City-St-Zip: | | Delete IER N ON AVE | Title: Name: Address: City-St-Zip: | ()(| Change () Addition | |
| Title: Name: Address: City-St-Zip: | VP () HARDT, DAVID 22 ROSALIE O LAKE WALES, | | Title: Name: Address: City-St-Zip: | ()(| Change()Addition | |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: DAVID NERAD P 04/14/2007