2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

AMENDED ANNOAE REPORT										
DOCUMENT # P03000145421										
1. Entity Name					8		ſ		J	
FIELDS	PAINTING, INC.	7					05 MAY	31 PI	4 : 45	5
Principal Place of Business Mailing Address							SECRET	ARY Of	FSTATE	- -
116 MARIS COURT 116 MARIS COURT							TALLAH			
LAKELAND, FL 33809 US LAKELAND, FL 33809			US							
										E E E E E E E E E E
2. Principal Place of Business 3. Mailing Address										
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Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			05252005	Chg-P	CR2E0	34 (10/03)	
City & State		City & State			4. FEI Numbe			I I Ar	oplied For	
						56-2423				ot Applicable
Zip	Country Zip		Count	Country		5. Certificate	of Status Desired		\$8.75 Add	
	S. Nome and Address of Courset Paristand Asset							Fee Required		
6. Name and Address of Current Registered Agent				Name	7. Name and Address of New Registered Agent					
FIELDS, BEN										
116 MARIS COURT LAKELAND, FL 33809				Street Address (P.O. Box Number is Not Acceptable)						
LAKELANI	D, FL 33009									
				City					Zip Cod	le
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										
9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees										
Trust Furid Contribution.						a to Fees				
10.	OFFICERS AN	D DIRECTORS	11.			ADDITIONS/	CHANGES TO OFF	CERS AND	DIRECTOR	S IN 11
TITLE	D DEN	☐ Delete	TITLE						Change	Addition
Name Street address	FIELDS, BEN 116 MARIS COURT		NAME STREE	et address						
CITY-ST-ZIP	LAKELAND, FL 33809			-ST-ZiP						
TITLE	C,P □ Delete		TITLE	:					☐ Change	☐ Addition
NAME	FIELDS, BEN		NAME	ε		ГH	nnnee:	222		
STREET ADDRESS	116 MARIS COURT			ET ADDRESS		06708	00055 : 37050106	4003	**51	.28
CITY-ST-ZIP	LAKELAND, FL 33809	——————————————————————————————————————		-ST-ZIP			·			
TITLE NAME	FIELDS, JAMES	Delete	TITLE	i					☐ Change	Addition Addition
STREET ADDRESS	116 MARIS COURT			ET ADDRESS						
CITY-ST-ZIP	LAKELAND, FL 33809			-ST-ZIP						
TITLE	T,S	Defete	TITLE		SEC	BETARY BECCA MARIS	4 -		☐ Change	Addition
NAME	MUNDIS, REGINA		NAME	E /	BEB.	BECCA	Pas I			•
STREET ADDRESS CITY-ST-ZIP	116 MARIS COURT LAKELAND, FL 33809			ET ADDRESS # -St-zip /	76	AL 3	7040			
TITLE	LANCEAND, I E 33003	☐ Delete	TITLE	- J-21	<u>50</u>	7C 3	<i>3</i> 809		☐ Change	W
NAME		L_3 Delete	NAME		KI	ISURER NA MUNU NARIS C)15		Change	Addition
STREET ADDRESS				ET ADDRESS	160	MARIS C	1	Δ	10	
CITY-ST-ZIP			CITY-	·ST-ZIP	Κό	7L 33	809	/1	2/1	
TITLE		☐ Delete	TITLE	i				XU	Change	Addition
NAME Street address			NAME					$\mathcal{I}\mathcal{D}$	`	
CITY+ST-ZIP		. •		ET ADDRESS -ST-ZIP				¥		
12. I hereby o	certify that the information supplied wi	th this filing does not qualify for	the exer	notion stated	in Sec	tion 119.07(3)(i), Florida Statutes I	further cert	ify that the in	nformation
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 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										
caanged.	or on an attachment with an address	, with all other like empowered.								

SIGNATURE: USIN FULL SIGNATURE AND TYPED DR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Claus Pulsar

CHRIS DUBOSE

MY COMMISSION # DD 146365

EXPIRES: September 2, 2006

Bonded Thru Notary Public Medicals