## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with an address, with all other like empoy

GNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

## Jun 22, 2005 08:00 AM DOCUMENT # P03000145490 **Secretary of State** 1. Entity Name GREG CASH PAINTING INC. Principal Place of Business Mailing Address 5451 MARE CREEK DR. 5451 MARE CREEK DR. CRESTVIEW, FL 32539 US CRESTVIEW, FL 32539 US CR2E034 (10/03) 05092005 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 56-2322935 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent CASH, GREGORY DO NOT WRITE 5451 MARE CREEK DR. CRESTVIEW, FL 32539 IN THIS SPACE 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. Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 7, 2005 10. OFFICERS AND DIRECTORS DIR TITLE NAME CASH, GREGORY 5451 MARE CREEK DR. STREET ADDRESS CITY-ST-ZIP CRESTVIEW, FL 32539 TITLE U00000369723 NAME STREET ADDRESS 06/22/05-80001-026 150.nn CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS 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)(1). 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 path; 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 empoyered.

FILED