## 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Apr 18, 2006 08:00 AM Secretary of State DOCUMENT # P03000146597 GEORGE P. SOVICH PAINTING, INC. Principal Place of Business Mailing Address 2845 W. KING ST. COCOA FL 32926 272 SCENIC DR COCOA FL 32926 2. Principal Place of Business 3. Mailing Address Suite. Apt. II, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State City & State Applied For 4. FEI Number 58-2678241 Not Applicat Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SOVICH, GEORGE P Street Address (P.O. Box Number is Not Acceptable) 272 SCÉNIC DR **COCOA FL 32926** Zip Code 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, typera or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstalling) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May B. After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE [ Addition NAME SOVICH, GEORGE P NAME 000000517161 STREET ADDRESS 272 SCENIC DR STREET ADDRESS 05/01/06-30034-009 150.00 CITY-ST-ZIP **COCO**A FL 32926 CHTY-ST-ZIP TITLE ☐ Delete THEF Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THLE ☐ Detete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete τιτ(€ ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZP CITY- ST-ZIP TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY'ST-70 Delete TOTLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZW CHY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

George P Sourch

4/12/00

FILED