

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000146895

Entity Name: TNT PAINTING INC.

FILED
Jun 15, 2005
Secretary of State

Current Principal Place of Business:

6815 WEST UNIVERSITY AVE.
APT 5202
GAINESVILLE, FL 32607 US

New Principal Place of Business:

Current Mailing Address:

6815 WEST UNIVERSITY AVE.
APT 5202
GAINESVILLE, FL 32607 US

New Mailing Address:

FEI Number: 20-0471842

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WISNIEWSKI, TOMASZ A
Address: 6815 WEST UNIVERSITY AVE. APT. 5202
City-St-Zip: GAINESVILLE, FL 32607 US

Title: D () Delete
Name: WISNIEWSKI, TOMASZ
Address: 4416 NW 43RD PL
City-St-Zip: GAINESVILLE, FL 32607 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: SCOTT-WEBSTER, JOSEPH A
Address: 611 NW 34TH AVE
City-St-Zip: GAINESVILLE, FL 32609

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: TOMASZ A. WISNIEWSKI

D

06/15/2005

Electronic Signature of Signing Officer or Director

Date