## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000148512

Address:

City-St-Zip:

FILED Jan 08, 2004 Secretary of State

Entity Name: NEW DIMENSION PAINTING EXPRESSIONS, INC. **Current Principal Place of Business: New Principal Place of Business:** 3909 CARDIFF PLACE PARISH, FL 34219 **Current Mailing Address: New Mailing Address:** 3909 CARDIFF PLACE PARISH, FL 34219 FEI Number: 56-2422094 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ASH, CHRISTOPHER J 3909 CARDIFF PLACE PARISH, FL 34219 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: ( ) Change (X) Addition NITTI - ASH, DENISE A MRS. Name: Name: 3909 CARDIFF PLACE Address: Address: City-St-Zip: City-St-Zip: PARRISH, FL 34219 US Title: () Delete Title: PRES ( ) Change (X) Addition Name: Name: BENNETT, TIMOTHY P MR. 3909 CARDIFF PLACE Address: Address: PARRISH, FL 34219 US City-St-Zip: City-St-Zip: Title: Title: ( ) Change (X) Addition () Delete ASH, CHRISTOPHER J MR. Name: Name: 3909 CARDIFF PLACE Address Address: City-St-Zip: City-St-Zip: PARIRSH, FL 34219 US Title: () Delete Title: ( ) Change (X) Addition ASH, CHRISTOPHER J MR. Name: Name:

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.

Address:

City-St-Zip:

3909 CARDIFF PLACE

PARRISH, FL 34219 US

VΡ SIGNATURE: CHRISTOPHER J. ASH 01/08/2004