2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000000991

FILED Oct 18, 2006 Secretary of State

Entity Name: JECODY PAINTING SERVICES INC.		•	
Current Principal Place of Business:	New Principal Place of I	New Principal Place of Business:	
6169 BOXLEAF PLACE LAKE WORTH, FL 33467			
Current Mailing Address:	New Mailing Address:		
6169 BOXLEAF PLACE LAKE WORTH, FL 33467 US			
FEI Number: 41-2120396 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:	Name and Address of N	Name and Address of New Registered Agent:	
GALLO, PAUL E 6169 BOXLEAF PLACE LAKE WORTH, FL 33467 US			
The above named entity submits this statement for the in the State of Florida.	e purpose of changing its registered of	fice or registered agent, or both,	
SIGNATURE:			
Electronic Signature of Registered A	Agent	Date	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES	TO OFFICERS AND DIRECTORS	
Title: P () Delete Name: GALLO, PAUL E Address: 6169 BOXLEAF PLACE	Title: () Name: Address:	Change () Addition	

Title: P () Delete Title: () Change () Addition Name:

Address: 6169 BOXLEAF PLACE Address:
City-St-Zip: LAKE WORTH, FL 33467

Title: () Delete Title: VP () Change (X) Addition Name:
Name: GALLO, SUSAN M Address: 6169 BOXLEAF PLACE
City-St-Zip: LAKE WORTH, FL 33467

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: PAUL GALLO P 10/18/2006