

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P04000002802

**FILED**  
**Aug 08, 2007**  
**Secretary of State****Entity Name:** THOMAS M BOCCIA CUSTOM PAINTING INC**Current Principal Place of Business:**10490 MAYFLOWER RD  
SPRING HILL, FL 34608**New Principal Place of Business:****Current Mailing Address:**10490 MAYFLOWER RD  
SPRING HILL, FL 34608**New Mailing Address:****FEI Number:** 41-2120519**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BOCCIA, THOMAS  
10490 MAYFLOWER RD  
SPRING HILL, FL 34608 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:** P ( ) Delete  
**Name:** BOCCIA, THOMAS M  
**Address:** 10490 MAYFLOWER RD  
**City-St-Zip:** SPRING HILL, FL 34608**Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** T ( ) Change (X) Addition  
**Name:** BOCCIA, MICHAEL E  
**Address:** 10399 BELLTOWER RD  
**City-St-Zip:** SPRING HILL, FL 34608

I hereby certify that the information supplied with this filing does not qualify 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: THOMAS M. BOCCIA

P

08/08/2007

Electronic Signature of Signing Officer or Director

Date