2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000016847

1. Entity Name

PETÉ'S PAINTING OF USA INC.



FILED Apr 17, 2006 8:00 am Secretary of State 04-17-2006 90415 039 ***150.00

					_			
Principal Place of Business Mailing Address		Mailing Address						
601 ROSERY RD N.E.		601 ROSEBY RO N.E.					900123	ŎΒ
APT. 2582		APT. 2852					•	_
LARGO, FL 33770		LARGO, FL 33770			1 (88)(88) (1)	09) 0:51: 851 00 : 55		
9 Diam'r 15	Place of Business	O Mailine Address						
		3. Mailing Address				NALIA DEBAH DEBAH ERIAL DI		
Suite, Apt.		Suite, Apt. #, etc.			4			
Julie, Apr.	#, Old.	Julia, Apr. #, etc.			04052006	Chg-P	CR2E034 (11/05)
City & Stat	te	City & State			4. FEI Numbe	r	1.1	Applied For
CLEAR	quater fl	'			20-062	7347	- +	Not Applicable
Zip	Country	Zip	Country		5 Cartification	of Chabas Desired	□ \$8.75 A	dditional
33	755				5. Certificate	of Status Desired	Fee Requi	
	6. Name and Address of Current	Registered Agent			7. Name and	Address of New I	Registered Agent	
0050	, Derran		j Na	lame	RNAK	PETER	2	
CSERNAK, PETER				Street Address (P.O. Box Number is Not Acceptable)				
601 ROSERY RD N.E. APT. 2552				Officer Address (1.10), DOX Northour IS NOT Acceptable)				
LARGO, F			1200	PIDGE	E AVE			
27.12 33774				ity A		e Ave Er	Zip Co	
								33755
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 REGISTRED AGENT 04/05/06								
	Signature, typed or printed name of registered agent	and the if applicable. (NOTI	E: Registered Ager	ent signature required	d when reinstating)		DATE	
	E NOW!!! FEE IS \$150.00	9. Election Campai			.00 May Be			
Arter M	ay 1, 2006 Fee will be \$550.	OO Huser and Com	indution.	A00	160 10 F895			
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/	CHANGES TO OFF	FICERS AND DIRECTO	RS IN 11
TITLE	P	☐ Delete	TITLE				Change	☐ Addition
NAME	CSERNAK, PETER		NAME				_	
STREET ADDRESS	601 ROSERY RD N.E., APT. 25:	52	STREET ADI	DRESS 126	25 RIDO	SE AVE ER FL		
CITY-ST-ZIP	LARGO, FL 33770	· · · · · · · · · · · · · · · · · · ·	CITY+\$1-Z	ZIP CLE	earmat	er fl	33755	
TITLE		☐ Delete T					☐ Change	Addition
NAME			NAME					
STREET ADDRESS			STREET ADD					
CITY-ST-ZIP			CITY-ST-Z	ZIP				
TITLE		Delete	TITLE	ł			☐ Change	Addition
NAME			NAME					
STREET ADDRESS CITY-ST-ZIP			STREET ADI					
			CITY-ST-Z	ZIP				
TITLE		☐ Delete	TITLE				☐ Change	: Addition
NAME			NAME					
STREET ADDRESS CITY-ST-ZIP			STREET ADI					
CHT-SI-ZIP			CITY-ST-Z	ZIP				
TITLE		☐ Delete	TITLE				Change	Addition
NAME CIDECT ADDRESS			NAME STORET ADI	DDCCC				
STREET ADDRESS CITY-ST-ZIP			STREET ADI					
			CITY-ST-Z	μr				
TITLE		☐ Delete	TITLE				Change	☐ Addition
NAME CYDEEX ADDRESS			NAME	, norna				
STREET ADDRESS			STREET ADI					
CITY-ST-ZIP			CITY-ST-Z	AIT				
i 19 Ibarahu								
indicated	certify that the information supplied with	h this filing does not qualify for strue and accurate and that he	or the exempt	tions contained	d in Chapter 119	, Florida Statutes.	I further certify that the oath; that I am an office	information
indicated of the cor	certify that the information supplied with on this report or supplemental report proration or the receiver or trustee emplor or on an attachment with an address,	s true and accurate and that no cowered to execute this report	ny signature s as required b	shall have the	same legal effec	t as if made under	oath; that I am an offic	er or director

CSERNAK PETER PRES.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/05/06

727 642-2709 Daytime Phone #