2006 FOR PROFIT CORPORATION

ANNUAL REPORT FILED DOCUMENT # P04000036348 Feb 20, 2006 08:00 AN 1. Entity Name **Secretary of State** GENIS PAINTING CO. . Principal Place of Business Mailing Address 3995 TORRES CIRCLE 3995 TORRES CIRCLE W.P.B., FL 33409 W.P.B., FL 33409 CR2E034 (11/05) 01252006 No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 06-1718307 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GENIS, GLENN P DO NOT WRITE 3995 TORRES CIRCLE W.P.B., FL 33409 IN THIS SPACE 8. The above named entity submits this statement for life 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 or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE GENIS, GLENN P NAME STREET ADDRESS 3995 TORRES CIRCLE CITY-ST-ZIP W.P.B., FL 33409 1100000442572 MILE 03/04/06-80023-016 150.00 NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME. STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR