2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000037583

Entity Name: PAINT 1, INC.

FILED Mar 06, 2006 Secretary of State

Littly Name: FAINT 1, INC.						
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
795 8TH C VERO BEA	T. ICH, FL 32962					
Current Mailing Address:			New Mailing Address:			
795 8TH C VERO BEA	T. .CH, FL 32962	:				
FEI Number: 45-0536079 FEI Number Applied For () FEI Nu		El Number Not Appli	mber Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					ew Registered Agent:	
1101 SIMÓ	THEODORE V NTON STREE 7, FL 33040					
The above in the State		ubmits this statement for the purp	oose of changing it	s registered of	ffice or registered agent, or both,	
SIGNATUR	RE:					
Electronic Signature of Registered Agent				Date		
Election Carr	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip: Title: Name:	SHIPLEY, JOHN 795 8TH CT. VERO BEACH, I ST () SHIPLEY, BREN	FL 32962 Delete	Title: Name: Address: City-St-Zip: Title: Name:	SAGE, MATTHE 8377 BAYTREE VERO BEACH, I ST (X) ROWE, TIMOTH	DRIVE FL 32963 Change () Addition HY	
Address: City-St-Zip:	795 8TH CT. VERO BEACH, I	FL 32962	Address: City-St-Zip:	13840 158TH S JUPITER, FL 3		
Title: Name: Address: City-St-Zip:	O (X) ENGLEHART, TI 1000 27TH AVE VERO BEACH, F	SW	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address:	VP (X) SAGE, MATTHE 8377 BAYTREE		Title: Name: Address:	()	Change () Addition	

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.

City-St-Zip:

SIGNATURE: MATTHEW H. SAGE P 03/06/2006

VERO BEACH, FL 32963

City-St-Zip: