


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # P04000045054</b> 1. Entity Name <b>JOSE BURGH PAINTING, INC.</b>						<b>FILED</b> 05 APR 29 AM 9:04 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business <b>1537 NE 39TH AVENUE APARTMENT A OCALA, FL 34470 US</b>				Mailing Address <b>1537 NE 39TH AVENUE APARTMENT A OCALA, FL 34470 US</b>			
2. Principal Place of Business <b>10 Teak et</b> Suite, Apt. #, etc.				3. Mailing Address <b>10 Teak et</b> Suite, Apt. #, etc.			
City & State <b>Ocala, FL</b>				City & State <b>Ocala, FL</b>			
Zip <b>34472</b>		Country <b>Marion</b>		Zip <b>34472</b>		Country <b>Marion</b>	
4. FEI Number <b>043787138</b>				Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required			
6. Name and Address of Current Registered Agent  <b>CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301</b>				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code			
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, and I, the undersigned, am familiar with, and accept the obligations of registered agent.							
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>							
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
<b>10. OFFICERS AND DIRECTORS</b>				<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>BURGH, JOSE</b> <b>1537 NE 39TH AVENUE, APARTMENT A</b> <b>OCALA, FL 34470</b> <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Burgh, Jose</b> <b>10 Teak et</b> <b>Ocala FL 34472</b> (address) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>MCCLURE, BONNY</b> <b>1537 NE 39TH AVENUE, APARTMENT A</b> <b>OCALA, FL 34470</b> <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>McClure, Bonny</b> <b>10 Teak et</b> <b>Ocala FL 34472</b> (address) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.							
<b>SIGNATURE:</b> _____ <b>Jose Burgh</b> <b>4-26-05 (352) 804-6757</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>							

Roberts MAY 02 2005



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 344896 7424152

AUTHORIZATION :

COST LIMIT : \$ 150.00

*Patricia Pigute*

ORDER DATE : April 29, 2005

ORDER TIME : 1:49 PM

ORDER NO. : 344896-005

CUSTOMER NO: 7424152

CUSTOMER: Mr. Jose Burgh  
Mr. Jose Burgh  
10 Teak Court

Ocala, FL 34472-9042

RECEIVED  
05 APR 29 PM 3:03  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

NAME: JOSE BURGH PAINTING, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman-EXT#2908

EXAMINER'S INITIALS: \_\_\_\_\_