

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000070101

FILED  
Apr 22, 2005  
Secretary of State

Entity Name: UNIQUE PAINTING SERVICES INC

## Current Principal Place of Business:

789 MERRIMAC STREET  
DELTONA, FL 32725

## New Principal Place of Business:

## Current Mailing Address:

789 MERRIMAC STREET  
DELTONA, FL 32725

## New Mailing Address:

FEI Number: 90-0219043

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TORRES, HECTOR L  
789 MERRIMAC STREET  
DELTONA, FL 32725 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: TORRES, HECTOR L  
Address: 789 MERRIMAC STREET  
City-St-Zip: DELTONA, FL 32725 US

Title: TRES ( ) Delete  
Name: TORRES, HECTOR L  
Address: 789 MERRIMAC STREET  
City-St-Zip: DELTONA, FL 32725

Title: SEC ( ) Delete  
Name: TORRES, HECTOR L  
Address: 789 MERRIMAC STREET  
City-St-Zip: DELTONA, FL 32725 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SEC (X) Change ( ) Addition  
Name: TORRES, MARISOL  
Address: 789 MERRIMAC STREET  
City-St-Zip: DELTONA, FL 32725 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: HECTOR TORRES

PRES

04/22/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date