

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 18, 2005 8:00 am
Secretary of State

07-18-2005 90046 050 ***158.75

DOCUMENT # P04000075624

1. Entity Name
BERITH PAINTING, INC.



Principal Place of Business
**5702 FIVE FLAGS BLVD
#2063
ORLANDO, FL 32822**

Mailing Address
**5702 FIVE FLAGS BLVD
#2063
ORLANDO, FL 32822**

50055751



2. Principal Place of Business
2886 PAYNES PRAIRIE CIR
Suite, Apt. #, etc.

3. Mailing Address
2886 PAYNES PRAIRIE CIR
Suite, Apt. #, etc.

07122005 Chg-P CR2E034 (10/03)

City & State
KISSIMMEE, FL

City & State
KISSIMMEE, FL

4. FEI Number
34-1994028

Applied For
Not Applicable

Zip
34743

Country
USA

Zip
34743

Country
USA

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MARTINEZ, LUIS A
5702 FIVE FLAGS BLVD
#2063
ORLANDO, FL 32822**

7. Name and Address of New Registered Agent

Name
MARTINEZ, LUIS A.
Street Address (P.O. Box Number is Not Acceptable)
2886 PAYNES PRAIRIE CIR
City
KISSIMMEE FL Zip Code
34743

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

[Signature]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

7-11-05

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
P
NAME
MARTINEZ, LUIS A ☐ Delete
STREET ADDRESS
5702 FIVE FLAGS BLVD #2063
CITY-ST-ZIP
ORLANDO, FL 32822

TITLE
VP
NAME
MARTINEZ, BRIGITTE ☐ Delete
STREET ADDRESS
5702 FIVE FLAGS BLVD #2063
CITY-ST-ZIP
ORLANDO, FL 32822

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
D ☒ Change ☐ Addition
NAME
MARTINEZ, LUIS A.
STREET ADDRESS
2886 PAYNES PRAIRIE CIR
CITY-ST-ZIP
KISSIMMEE, FL 34743

TITLE
D ☒ Change ☐ Addition
NAME
MARTINEZ, BRIGITTE
STREET ADDRESS
2886 PAYNES PRAIRIE CIR
CITY-ST-ZIP
KISSIMMEE, FL 34743

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-11-05

Date

321-960-5128

Daytime Phone #