

2005 FOR PROFIT CORPORATION ANNUAL REPORT

APPROVED
AND
FILED
7/5/2005-90113-018-\$150.00-\$150.00

05 JUL 25 AM 9:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000077262			
1. Entity Name FERRARA QUALITY PAINTING, INC.			
Principal Place of Business 3204 RESERVE CT. ORLANDO, FL 32825		Mailing Address 3204 RESERVE CT. ORLANDO, FL 32825	
2. Principal Place of Business 10463 Stone Glen Dr. Suite, Apt. 8, etc.		3. Mailing Address 10463 Stone Glen Dr. Suite, Apt. 8, etc.	
City & State Orlando FL		City & State Orlando FL	
Zip 32825		Zip 32825	
County Orange		County Orange	
4. FEI Number 201137300		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FERRARA, LINDA 3204 RESERVE CT. ORLANDO, FL 32825		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is also acceptable) 10463 Stone Glen Dr. City Orlando FL Zip 32825	
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 <u>Linda Ferrara</u>		6/30/05	
FILE NUMBER PER IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May be Added to Fee	
In accordance with s. 607.103(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D FERRARA, LINDA 3204 RESERVE CT. ORLANDO, FL 32825	☐ Drop	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D FERRARA, JOSEPH 3204 RESERVE CT. ORLANDO, FL 32825	☐ Drop	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	10463 Stone Glen Dr. Orlando FL 32825
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 13.007(3)(b), 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: <u>Linda Ferrara</u>		6/30/05 (407) 384-0381	