

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000112785	
1. Entity Name LIBERTY PAINTING SERVICES, INC.	

Principal Place of Business 4227 TENNYSON WAY VENICE, FL 34293	Mailing Address 4227 TENNYSON WAY VENICE, FL 34293
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03142006 No Chg-F CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 38-3705914	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**MAIELI, CARMINE L
4227 TENNYSON WAY
VENICE, FL 34293**

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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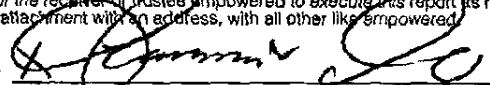
10. OFFICERS AND DIRECTORS

TITLE CHRD	NAME MAIELI, CARMINE L
STREET ADDRESS 4227 TENNYSON WAY	CITY-ST-ZIP VENICE, FL 34293
TITLE PT	NAME MAIELI, CARMINE L
STREET ADDRESS 4227 TENNYSON WAY	CITY-ST-ZIP VENICE, FL 34293
TITLE VSD	NAME MAIELI, MASSIMO G
STREET ADDRESS 4227 TENNYSON WAY	CITY-ST-ZIP VENICE, FL 34293
TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

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04/17/06-00011-014 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  **3-28-06**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE _____ Daytime Phone # _____