2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 13, 2005
Secretary of State

DOCUMENT# P04000163289

Entity Name: QUICK SPRAY PRESSURE WASHING INC

Current Principal Place of Business:

P O BOX 43362
JACKSONVILLE, FL 32203

New Principal Place of Business:

519 WEST 23RD STREET
#2
JACKSONVILLE, FL 32206 US

Current Mailing Address:

P O BOX 43362
JACKSONVILLE, FL 32203

New Mailing Address:

P O BOX 43362
JACKSONVILLE, FL 32203 US

FEI Number: 20-1982187 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STEPHENS, ROBERT R
2188 W 13TH STREET
JACKSONVILLE, FL 32209 US

Name and Address of New Registered Agent:

STEPHENS, ROBERT R
519 WEST 23RD STREET
#2
JACKSONVILLE, FL 32206 US

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: 05/13/2005
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: STEPHENS, ROBERT R
Address: 2188 W 13TH STREET
City-St-Zip: JACKSONVILLE, FL 32209

Title: VP ( ) Delete
Name: CARTER, LAVERN
Address: 2188 W 13TH STREET
City-St-Zip: JACKSONVILLE, FL 32209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: STEPHENS, ROBERT R
Address: 519 WEST 23RD STREET #2
City-St-Zip: JACKSONVILLE, FL 32206 US

Title: VP (X) Change ( ) Addition
Name: CARTER, LAVERN
Address: 519 WEST 23RD STREET #2
City-St-Zip: JACKSONVILLE, FL 32206 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: LA VERN CARTER VP 05/13/2005
Electronic Signature of Signing Officer or Director Date