## **2007 FOR PROFIT CORPORATION ANNUAL REPORT**

## DOCUMENT # P05000138124 1. Entity Name

BRUCE EISENBERGER PAINTING INC.

Principal Place of Business

3550 E VIADUCT LANE #B

HERNANDO, FL 34442

EISENBERGER, BRUCE

3550 E VIADUCT LANE #B HERNANDO, FL 34442



Mailing Address

3550 E VIADUCT LANE #B HERNANDO, FL 34442 US

## **FILED** Apr 05, 2007 08:00 Al Secretary of State



DO	<b>NOT</b>	<b>WRITE</b>	IN	<b>THIS</b>	<b>SPACE</b>
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6. Name and Address of Current Registered Agent

CR2E034 (11/05) 01102007 No Chg-P

4. FEI Number 59-3821599

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the pations of registered agent.	urpose of changing its registered office	or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and little it	Fappikable (NOTE: Registered Agent sign	rature required when reinstating)	DATE
FIL After M	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS		<u> </u>
TITLE	P			·
NAME	EISENBERGER, BRUCE			
STREET ADDRESS	3550 E VIADUCT LANE #B	i i		•
CITY-ST-ZIP	HERNANDO, FL 34442	1		U00000691473
TITLE	VP			04/13/07-80012-007 150.d
NAME	CHIANTI, CECILY	i		
STREET ADDRESS	3550 E VIADUCT LANE #B	_		
CITY-ST-ZIP	HERNANDO, FL 34442	· ·		* * * * * * * * * * * * * * * * * * * *
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CITY-ST-ZIP	HERNANDO, FL 34442	Ï		
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NAME		i		
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12. I hereby certify that the information supplied with this filling 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 eath; 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 attrachment with an address, with all other tike empowered.

NAME **STREET ADDRESS** CITY-ST-ZIP