

**FILED**  
**Sep 12, 2006 8:00 am**  
**Secretary of State**

09-12-2006 90011 011 \*\*\*550.00

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT # P05000150703					
1. Entity Name B&Z PAINTING SERVICES, INC.					
Principal Place of Business 1415 RADLEIGH PL ORLANDO, FL 32808		Mailing Address 1415 RADLEIGH PL ORLANDO, FL 32808			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>20-3779403</b>	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
6. Name and Address of Current Registered Agent  MATURA, BRIAN M 1415 RADLEIGH PL ORLANDO, FL 32808			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing)</small>					
<b>FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MATURA, BRIAN M 1415 RADLEIGH PL ORLANDO, FL 32808	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: <u>Brian Matura</u>			Date: <u>1/9/06</u> Daytime Phone #: <u>407-408-6345</u>		

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07242006 Chg-P CR2E034 (11/05)

4. FEI Number **20-3779403** Applied For  Not Applicable

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

**FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

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