2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P93000012873

1. Entity Name
MURPHY-DOUGLAS PAINTING, INC.

FILED Apr 26, 2004 08:00 AM Secretary of State

Principal Place of Business

P O BOX 5464 SARASOTA, FL 34277-5464 Ma-ng Address

P O BOX 5464

SARASOTA, FL 34277-5464



04212004

No Chg-P

CR2E034 (10/03)

4, FEI Number 65-0393285

Applied For Not Applicable

5. Cert'l cate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MURPHY, NADIA 3318 BOUFAINVILLEA ST. SARASOTA, FL 34239

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	named entity submits this statement for the $\bar{\rho}$ ons of registered agent	urpose of changing its registere	d office or r	egistered agent or bo	olin in the State of Fiorida II am familiar with, and accept
SIGNATURE Signature, recede a laced name of logist collagorative trapicance. Participation and register on a collagorative trapical collagorative trapicance.					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees			000000129733 04/26/04-80090-003 (50.00
10. OFFICERS AND DIRECTORS					
THEE NAME STREET ADDRESS CITY ST ZIP	PD MURPHY, TIM 3318 BOUGAINVILLEA STR SARASOTA, FL				
FITLE NAME STREET ADORESS CITY ST ZIP	VD DOUGLAS, DAVID 2831 TRINIDAD ST. SARASOTA, FL				
TITLE RAME STREET ADDRESS CITY ST ZIP	STD MURPHY, NADIA 3318 BOUGAINVILLEA STR SARASOTA, FL		DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY ST ZIP					
TITLE KAME STREET ADORESS CITY ST ZIP					

12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes I further certify that the information indicated on this report or suppliemental 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 directions are required by Chapter 607. Florida Statutes, and that my name appears in Block 10 or Block 11 directions.

SIGNATURE:

TITLE NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF TICER OR DIRECTOR

MURPHY 4-20-04

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