## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 01, 2006 08:00 AM Secretary of State

ANNUAL REPORT				Secretary of State			
DOCUMENT # P94000049859				}	Secret	ary or Star	ıc
1. Entity Name WASHBURN PAINTING INC.							
1361 SW 32ND STREET		Mailing Address 1361 SW 32ND STREET FT. LAUDERDALE, FL 33315				1 8550 LIESE LOISE LOIN BRIE (51)	<b>18</b>
D	O NOT WRITE	D2132006 No Chg-P CR2E034 (11/05)  4. FEL Number   Applied Fur   59-2535127   Not Applied Fur   50. Certificate of Status Desired   \$8.75 Additional   Fee Required				Applicable nonal	
\	8. Name and Address of Current 8	tegistered Agent	-				
WASHBURN, RANDY 1361 SW 32ND STREET FT. LAUDERDALE, FL 33315				-	NOT W		
	named entity submits this statement for ions of registered agent.	the purpose of changing its registe	red office or register	red agent, or bo	h, in the State of Flo	orida. I am familiar with, a	ind accept
SIGNATURE.	Signalulu, typed or printed name of registered agent a	nd mu il applicable (NOTE: Register	ed Agent signature requires	d when reinstabno		DATE	<del></del>
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	9. Election Campaign Fina		.00 May Be led to Fees			
10.	OFFICERS AND I	DIRECTORS	_				
NAME STREET ADDRESS CITY ST. ZIP	PD WASHBURN, RANDY 1361 SW 32ND STREET FT. LAUDERDALE, FL 33315	· ·					
DILE NAME SINCET ADDRESS CITY-ST-ZIP	ST WASHBURN, TAMMY 1361 SW 32ND STREET FT. LAUDERDALE, FL 33315		1		###000 +43/10/06-7	453527 90060-020 158.	.75
DILE NAME SIRLET ADDRESS GITY-SI-ZIP	THE PROPERTY OF THE STATE OF TH			DO	NOT W	RITE	
TITLE NAME SIRELI ADDRESS CITY-SI-ZIP	<b>.</b>				THIS SF		
THLE NAME SIREEI ADDRESS CITY-ST-ZIP							
NAME SIRELI ADDRESS CHY-SI-ZIP							

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 cartify 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 cath; that I am an officer or director of the corporation or the receiver or lustee 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 tike empowered.

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: \_

02-23-66 Date

Daytime Priorie #