## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 24, 2008 08:00 A Secretary of State

|   |  |  |                  | _                         |                   | Lagranta                              | LIMEZ AT STA               |
|---|--|--|------------------|---------------------------|-------------------|---------------------------------------|----------------------------|
| DOCUMENT # P94000049859  1. Entity Name WASHBURN PAINTING INC.  |  |  | Secretary of Sta |                           |                   |                                       |                            |
| 1361 SW 32  | e of Business<br>ND STREET<br>DALE, FL 33315 | Mailing Address<br>1361 SW 32ND STREET<br>FT. LAUDERDALE, FL 33315 |                  |                           |                   |                                       |                            |
|   |  |  |                  |                           |                   |                                       |                            |
| DO NOT WRITE IN THIS SPACE  |  |  | CE               | 03182008                  | No Chg-P          | CR2E034 (                             | ·                          |
|   |  |  |                  | 4. FEI Numb<br>59-253     |                   |                                       | Applied For Not Applicable |
|   |  | •  |                  | 5. Certificate            | of Status Desired |                                       | 75 Additional<br>Required  |
|   | 6. Name and Address of Current Re            | gistered Agent   |                  |                           |                   |                                       |                            |
| WASHBURN, RANDY<br>1361 SW 32ND STREET<br>FT. LAUDERDALE, FL 33315  |  |  | ,                | DO                        | <b>NOT W</b>      | RITE                                  |                            |
|   |  |  |                  | IN T                      | THIS SP           | ACE                                   | ·<br>:                     |
| ļ   |  |  | <u> </u>         |                           | •                 |                                       |                            |
| 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   |  |  |                  |                           |                   |                                       |                            |
| FILE NOWILL FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Finan Trust Fund Contribution.   |  |  | ncing \$5        | .00 May Be<br>led to Fees |                   |                                       |                            |
| 10.   | OFFICERS AND DI                              | RECTORS  | 3 - 1 - 1 - 1    |                           |                   | <del></del>                           |                            |
| TITLE<br>NAME   | PD<br>WASHBURN, RANDY                        |  |                  |                           | U00000:           | 867315                                |                            |
| STREET ADDRESS<br>CITY-ST-ZIP   | 1361 SW 32ND STREET                          |  |                  |                           | 04/08/08-         | 80063-02                              | 2 150:00                   |
| TITLE   | FT. LAUDERDALE, FL 33315                     | ***************************************                            | 1                |                           | •                 |                                       |                            |
| NAME<br>STREET ADDRESS  | WASHBURN, TAMMY<br>1361 SW 32ND STREET       |  | ,                |                           | ,                 |                                       | , ,                        |
| CITY-ST-ZIP   | FT. LAUDERDALE, FL 33315                     |  | <u> </u>         |                           |                   |                                       | `                          |
| TITLE<br>NAME   |  |  |                  |                           |                   |                                       |                            |
| STREET ADORESS<br>CITY-ST-ZIP   |  |  |                  | DO                        | NOT W             | RITE                                  |                            |
| TITLE   |  | •  |                  | IN.                       | THIS SF           | ACE                                   |                            |
| NAME<br>STREET ADDRESS  |  |  |                  |                           |                   | · · · · · · · · · · · · · · · · · · · |                            |
| CITY-ST-ZIP<br>TITLE  |  |  | 1.               |                           | ,                 |                                       | ·                          |
| NAME  |  |  | 1                |                           |                   |                                       |                            |
| STREET ADDRESS<br>CITY-ST-ZIP   |  |  |                  |                           |                   | ·                                     |                            |
| TITLE   |  |  | 1                |                           |                   | •                                     |                            |

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 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 attackagent with an address, with all other like empowered.

SIGNATURE.

STREET ADDRESS CITY-ST-ZIP

GNATURE AND TYPED OR PRINTED MAKE OF SIGNING OFFICER OR DIRECTOR

3-19-08

Daytime Phone #