

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000063353

Entity Name: EMMAN PAINTING, INC.

FILED
May 25, 2006
Secretary of State

Current Principal Place of Business:

14010 NW 20TH COURT
OPA LOCKA, FL 33054 US

New Principal Place of Business:

Current Mailing Address:

20050 NW 65 COURT
MIAMI, FL 33015

New Mailing Address:

FEI Number: 65-0613998

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OLAIGBE, OLA
18441 NW 2ND AVE #220
MIAMI, FL 33169 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: OKPALA, NKECHI
Address: 20050 NW 65 COURT
City-St-Zip: MIAMI, FL 33015

Title: D () Delete
Name: OKPALA, COLUMBA
Address: 20050 NW 65 COURT
City-St-Zip: MIAMI, FL 33015

Title: VP () Delete
Name: OKPALA, CECILIA
Address: 5389 NW 188 STREET
City-St-Zip: MIAMI, FL 33055

Title: S () Delete
Name: OKPALA, NKECHI
Address: 20050 NW 65 COURT
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: OKPALA, OBIAJULU E
Address: 5389 NW 188 STREET
City-St-Zip: MIAMI, FL 33055

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NKECHI OKPALA

P

05/25/2006

Electronic Signature of Signing Officer or Director

_____ Date