2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 28, 2005 08:00 AM Secretary of State DOCUMENT # P96000046222 MEGA PAINTING, CORP. Principal Place of Business, Mailing Address 11 OLIVE DR 4315 NW 7TH ST SUITE #51 HIALEAH, FL 33010 US MIAMI, FL 33126 02212005 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0667919 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent VILLALOBOS, JUAN DO NOT WRITE 11 OLIVE DR APT. H IN THIS SPACE HIALEAH, FL 33010 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE PD VILLALOBOS, JUAN NAME U00000339169 04/28/05-80064-023 150.00 11 OLIVE DR APT H STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33010 IME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP I hereby certify that the information supplied with this filing 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 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 chapter 607 on an attacturent with an address, with all other like empowered.

ME OF SIGNING OFFICER OR DIRECTOR

FILED

Daytime Phone #