

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 08, 2005 8:00 am
Secretary of State

04-08-2005 90042 042 ***150.00

DOCUMENT # P97000030375

1. Entity Name

VENTO PAINTERS, INC.



Principal Place of Business

1463 RIDGE LANE ROAD
CLEARWATER FL 33755

Mailing Address

1463 RIDGE LANE ROAD
CLEARWATER FL 34615

2. Principal Place of Business

6009 BAYWAY CT.

3. Mailing Address

Suite, Apt. #, etc.

JAME

City & State

NEWPORT RICHEY, FL.

City & State

Zip

Country

34652

TAJCO

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RUBAI, JAWDET I
1345 SOUTH MISSOURI AVE., STE. 215
CLEARWATER FL 34616

7. Name and Address of New Registered Agent

Name

VINCENT L. SANTORO III

Street Address (P.O. Box Number is Not Acceptable)

6009 BAYWAY CT.

City

NEWPORT RICHEY,

FL

Zip Code

34652

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]

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME VENTO, JOSEPH A
STREET ADDRESS 1463 RIDGE LANE ROAD
CITY-ST-ZIP CLEARWATER FL 34615

TITLE VP ☒ Delete
NAME PENA, MARIO
STREET ADDRESS FIELDSTONE CT APT 4
CITY-ST-ZIP PALM HARBOR FL 34684

TITLE VP ☒ Delete
NAME COBLANCO, JOHN
STREET ADDRESS HERON COVE CT APT 5
CITY-ST-ZIP PALM HARBOR FL 34684

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition
NAME VINCENT L. SANTORO III
STREET ADDRESS 6009 BAYWAY CT.
CITY-ST-ZIP NEWPORT RICHEY, FL. 34652

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #