2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 01, 2004 8:00 am Secretary of State **DOCUMENT # P98000061061** 04-01-2004 90003 017 ***150.00 1. Entity Name NEW HORIZON PAINTING INC. Principal Place of Business Mailing Address 5890 W 20 LANE 5890 W 20 LANE 54024884 HIALEAH, FL 33016 HIALEAH, FL 33016 No Chg-P CR2E034 (10/03) 03242004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0849668 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DIAZ, FRANCISO J DO NOT WRITE 5890 W 20 LANE HIALEAH, FL 33016 IN THIS SPACE 6. 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) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE DIAZ, FRANCISCO J NAME STREET ADDRESS 5890 W 20 LANE CITY-ST-ZIP HIALEAH, FL 33016 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE 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 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 receipter 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 it changed, or on an attachment with an address, with all other like empowered. in Block 10 or Block 11 if SIGNATURE:

4G DEFICER OR DIRECTOR

FILED