## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

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## Jan 10, 2005 08:00 AM Secretary of State **DOCUMENT # P99000012969** 1. Entity Name AL'S PAINTING, INC. Principal Place of Business Mailing Address 13301 BISCAYNE DRIVE 13301 BISCAYNE DRIVE GRAND ISLAND, FL 32735 GRAND ISLAND, FL 32735 CR2E034 (10/03) 01052005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3558708 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RINGER, ALLEN DO NOT WRITE 13301 BISCAYNE DRIVE GRAND ISLAND, FL 32735 IN THIS SPACE 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 registe gister d agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be 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 RINGER, WALTER A NAME 35801 CR 439 STREET ADDRESS EUSTIS, FL 32736 CMY-ST-ZIP U00000175537 01/10/05-80054-012 1**50.00** NAME STREET ADDRESS CITY-ST-ZIP TETLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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.

NTED NAME OF SIGNING OFFICER OR DIRECTOR

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