2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

May 01, 2006 08:00 AM Secretary of State **DOCUMENT # P99000042816** SKYLINE PAINTING OF S.W. FLORIDA, INC. Principal Place of Business Mailing Address 508 SW 11 AVE 508 SW 11 AVE. CAPE CORAL, FL 33991 CAPE CORAL, FL 33991 No Chg-P CR2E034 (11/05) 04272006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0922987 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CHIKITUS, STEVEN DO NOT WRITE 508 SW 11 AVE. CAPE CORAL, FL 33991 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 registered agent. SIGNATURE (NOTE, Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE 18 \$150.00 After May 1, 2008 Fee will be \$550.00 Added to Fees Trust Fund Contribution. 10. OFFICERS AND DIRECTORS TITLE CHIKITUS, STEVEN NAME 508 SW 11 AVE. STREET ACCRESS CITY-ST ZIP CAPE CORAL, FL 33991 U000001546860 05/12/06-80001-005 150.00 TIFLE MAASE STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TIFLE IN THIS SPACE MAM STRUCT ADDRESS CITY-ST-ZIP MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 flock 11 if changed, or on an attachment with an address, with all other like empowered.