

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 12, 2006 8:00 am**  
**Secretary of State**

04-12-2006 90073 017 \*\*\*150.00

DOCUMENT # P99000045616

1. Entity Name  
TONY'S PAINTING AND DECORATING, INC.



Principal Place of Business  
424 SCARLET SAGE  
PUNTA GORDA, FL 33955 US

Mailing Address  
424 SCARLET SAGE  
PUNTA GORDA, FL 33955 US

40046684



2. Principal Place of Business  
9030 Burnt Store Rd  
Suite, Apt. #, etc.

3. Mailing Address  
9030 Burnt Store Rd  
Suite, Apt. #, etc.

03092006 Chg-P CR2E034 (11/05)

City & State  
Punta Gorda FL

City & State  
Punta Gorda FL

Zip  
33950

Country

Zip  
33950

Country

4. FEI Number  
65-0930857

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BILCIK, ANTON  
424 SCARLET SAGE  
PUNTA GORDA, FL 33955

Name

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

9030 Burnt Store Rd

City  
Punta Gorda FL Zip Code  
33950

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 ☒ Anton Bilcik ANTON BILCIK 3-28-06  
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, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	BILCIK, ANTON	424 SCARLET SAGE	PUNTA GORDA, FL 33955	<input type="checkbox"/> Delete
V	BILCIK, MICHAEL	424 SCARLET SAGE	PUNTA GORDA, FL 33955	<input checked="" type="checkbox"/> Delete
STD	BILCIK, MARIA	424 SCARLET SAGE	PUNTA GORDA, FL 33955	<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
		9030 Burnt Store Rd	Punta Gorda FL 33950	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
VSTD	Bilcik, Maria	9030 Burnt Store Rd	Punta Gorda FL 33950	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Maria Bilcik MARIA BILCIK 3-28-06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #