

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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Mar 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F16226 (5)

1. Corporation Name
A-1 PAINT, INC., OF PALM BEACH

Principal Place of Business 1018 5 AVENUE NORTH LAKE WORTH FL 33460	Mailing Address 1018 5 AVENUE NORTH LAKE WORTH FL 33460
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/27/1981	
21	22	23	24	25	26
Suite, Apt. #, etc.		City & State		Zip	
27		28		29	
Country		Country		Country	
21		22		23	
Country		Country		Country	
24		25		26	
Country		Country		Country	

4. FEI Number 59-2060311	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
EARL, WILLIAM E 1018 5TH AVE N. LAKE WORTH FL 33460				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P
NAME	EARL, WILLIAM E	1.2 NAME	EARL, WILLIAM E.
STREET ADDRESS	1400 FLA MANGO RD	1.3 STREET ADDRESS	2215 VERNON STREET
CITY-ST-ZIP	W PALM BEACH, FL 00000	1.4 CITY-ST-ZIP	LAKE WORTH, FL 22460
TITLE	ST	2.1 TITLE	ST
NAME	EARL, ROGER A.	2.2 NAME	EARL, BRIGITTE MAZYCK
STREET ADDRESS	8866 ARROWHEAD DR.	2.3 STREET ADDRESS	2215 VERNON STREET
CITY-ST-ZIP	LAKE WORTH FL	2.4 CITY-ST-ZIP	LAKE WORTH, FL 33460
TITLE	V	3.1 TITLE	
NAME	EARL, THOMAS L.	3.2 NAME	
STREET ADDRESS	3141 LILLIAN RD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	W PALM BEACH FL	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	
NAME	EARL, ROGER A.	4.2 NAME	
STREET ADDRESS	8866 ARROWHEAD DR.	4.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	
NAME	EARL, WILLIAM TODD	5.2 NAME	
STREET ADDRESS	5112 4-H SOCIETY PL W.	5.3 STREET ADDRESS	
CITY-ST-ZIP	W PALM BCH. FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *William E. Earl* **2-16-98 561 586 4749**

CR2E034 (10/97)