

FILE NOW; FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G14078**

(1)

1. Corporate Name

MODERN AUTO PAINTING, INC.

APPROVED
AND
FILED

MAY -1 PM 2:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

3. Mailing Address

% HARRY G. NILE
2031 BARDEN ST.
FORT MYERS FL 33916-4711

% HARRY G. NILE
2031 BARDEN ST.
FORT MYERS FL 33916-4711

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/20/1982

3a. Date of Last Report
05/01/1994

2. Principal Place of Business

2a. Mailing Address

21

2a

4. FEI Number
59-2425954

Applied For
Not Applicable

22. State, Apt # etc

27. State, Apt # etc

22

27

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

23. City, State

28. City, State

23

28

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

24. State, Apt # etc

29. State, Apt # etc

24

29

30. State, Apt # etc

6. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**NILE, HARRY G.
2031 BARDEN ST.
FORT MYERS FL 33901**

81. Name

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

83.

84. City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0105 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to 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 Sections 607.0105, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (IN 1)

| | |
|--------------------|--|
| 1. NAME | PD NILE, HARRY G. 2031 BARDEN ST. FORT MYERS FL |
| 2. STREET ADDRESS | |
| 3. CITY, STATE | |
| 4. NAME | |
| 5. STREET ADDRESS | |
| 6. CITY, STATE | |
| 7. NAME | |
| 8. STREET ADDRESS | |
| 9. CITY, STATE | |
| 10. NAME | |
| 11. STREET ADDRESS | |
| 12. CITY, STATE | |
| 13. NAME | |
| 14. STREET ADDRESS | |
| 15. CITY, STATE | |

| | |
|--------------------|---|
| 1. NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2. STREET ADDRESS | |
| 3. CITY, STATE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4. NAME | |
| 5. STREET ADDRESS | |
| 6. CITY, STATE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 7. NAME | |
| 8. STREET ADDRESS | |
| 9. CITY, STATE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 10. NAME | |
| 11. STREET ADDRESS | |
| 12. CITY, STATE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 13. NAME | |
| 14. STREET ADDRESS | |
| 15. CITY, STATE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

14. I, the undersigned, certify that the information supplied with this filing, voluntarily prepared and does not qualify for the exemption stated in Section 199.032, 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. This information is for the use of the corporation in the event of trading securities to provide the report is required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of the report or on the board with an address.

SIGNATURE:

Harry G. Nile
HARRY NILE
SIGNATURE AND TYPE IN PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAY 1, 1995

813-334-2729