

# 2003 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 08, 2003 8:00 am**  
**Secretary of State**

09-08-2003 90310 018 \*\*\*150.00

**DOCUMENT# P00000077407**

1. Entity Name

**AMAZING QUALITY PAINTING, INC.**

Principal Place of Business

Mailing Address

**11263 SW 12 CT**

**11263 SW 12 CT**

**DAVIE FL 33325**

**DAVIE FL 33325**

2. Principal Place of Business

3. Mailing Address

Suite Apt. #, etc.

Suite Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**65-1029556**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

**90154983**

6. Name and Address of Current Registered Agent

**Silva, Eli**

**11263 SW 12 CT**

**DAVIE FL 33325**

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

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.

SIGNATURE

*Eli Silva*

**Eli Silva - Director**

**08/27/03**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Register Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so. ☐  
 (See criteria on back)

**FILE NOW! FEE IS \$150.00**

**After MAY 1, 2003 Fee will be \$550.00**

**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete  
 NAME **Silva, Eli**  
 STREET ADDRESS **11263 SW 12 CT**  
 CITY-ST-ZIP **DAVIE FL 33325**

12. ADDITIONS /CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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 CITY-ST-ZIP

TITLE ☐ Delete  
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 STREET ADDRESS  
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(1), 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 11 or Block 12 N changed or on an attachment with an address, with all other like empowered.

SIGNATURE

*Eli Silva*

**Eli Silva - Director**

**08/27/03**

**(954) 242-3073**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

90154983

ATTACHMENT  
#P00000077407

FLORIDA DEPARTMENT OF STATE  
Division of Corporation  
2003 Uniform Business Report (UBR)  
409 East Gaines Street  
Tallahassee, FL 32399

Re: Filing of Uniform Business Report 2003

P00000077407

AMAZING QUALITY PAINTING, INC.

To Whom It May Concern:

This letter is to inform you that we have never received a  
Uniform Business Report form by the mail.

We would like to request you that you forgive all extra  
fees and penalties other than the primary of \$150.00 and  
accept the filling of our attached UBR, which has been  
prepared by our accountant.

Any questions or concern, feel free to contact our  
accountant at (954) 782-4000.

Sincerely,



Eli Silva - President

AMAZING QUALITY PAINTING, INC.  
11263 SW 12 CT  
DAVIE FL 33325  
Phone (954) 242 3073