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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED Apr 03 1998 8:00am

ANN	1998		Secretary of State DIVISION OF CORPORATIONS			Secretary of State		
	MENT # [TY DISCOUNT P	P93000023 PAINTING INC.	8099 (3)					
Principal Plac	o of Business	Made	an Addrage					
Principal Place of Business Mailing Address 11241 SW 175 STREET 11241 SW 175 STREET								
MIAMI FL 33			NI FL 33157					
							DO NOT WRITE IN THIS SPACE	
							3. Date Incorporated or Qualified	
9 Principal 6	Place of Business	20.14	ailing Address				03/26/1993 4. FEI Number Applied For	
21 Principal P	race or business	26	aning Address				4. FEI Number Applied For 65-0406488 Not Applied	nla
Suite, Apt.	#, etc.		uite. Apt #, etc.				SR 75 Additional	010
22		27					6. Certificate of Status Desired Fee Required	
City & Stal	te		ty & State				6. Election Campaign Financing \$5.00 May Be	
23		28		·			Trust Fund Contribution	
Zip	Country			- -	Country		8. This corporation owes or has paid the current year Intangible	į.
24	25	29 fress of Current Register	ed Agent	30			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
1.4	SPINA, RICHARD	stead of Current Neglater	oo Agent		B1]	Name	10, Name and Address of New Registered Agent	{
	241 SW 175 STREI	FT		<u> </u>				
	AMI FL 33157	-1		\'	82	Street Add	dress (P.O. Box Number is Not Acceptable)	- {
• • • • • • • • • • • • • • • • • • • •				Ī	B3	*		7
				ļ.	84	City	85 Zip Code	
						•	FL	
11. Pursuant	to the provisions of S	ections 607.0502 and 607.	1508, Florida Statut	es, the ab	OVB	named cor	rporation submits this statement for the purpose of changing its register ation's board of directors. I hereby accept the appointment as registered	ed
agent. I a	nn familiar with, and a	ccept the obligations of, S	ection 607.0505, Fi	orida Statu	ites.	and corpore	ation a bodic of directors. Thereby accept the appointment as registered	'
SIGNATURE		ame of negestated a year and title if ap		r e Salar			ured when reinstating) DATE	_
12.	Signature typed or printed in	OFFICERS AND DIRECT		13.	Agen	i signature requ	ured when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	- ⊢[8
TITLE	D	- 	DELETE	1.1 7170	.E		Change Addii	ion 3
NAME	LA SPINA, RICH	IARD		1.2 NAM	AE			
STREET ADDRESS	11241 SW 175	STREET		1.3 STR	EET A	ADDRESS		
CITY-S1-ZIP	MIAMI FL 33157			1.4 CITY	r - ST	- ZIP		[8
TITLE	D		DELETE	2 1 TITE	.E	- 1	☐ Change ☐ Addit	ion C
NAME	MALATINO, ROI			2.2 NAA			,, e , Mr.	- }
STREET ADDRESS	2524 NW 95TH CORAL SPRING					ADDRESS	·	-
CITY-ST-ZIP TITLE	COIVAL OF THIS	WIL	DELETE	2. 4 CIT 3.1 TITE		I - ZIP	☐ Chanoe ☐ Addii	ion
NAME				3.2 NAA]	County County	· -
STREET ADDRESS	}			•		NDORESS		
CITY-ST-ZIP				3.4. CIT				į
TITLE			DELETE	4.1 Tift	.E		Change Addit	ion
NAME]			4. 2 NA	ME	İ		
STREET ADDRESS]			4.3 STR	EET A	NDDRESS		1
CITY-ST-ZIP	ļ <u>-</u>		Drifte	4.4 CITY	-	- ZIP		
MILE			DELETE	5.1 TITL		ľ	Change L Addii	ion
NAME STOCET ADDRESS	1			5.2 NAM		Duotee		
STREET ADDRESS CITY-ST-ZIP				5.3 STR 5.4 CITY		ADDRESS		
TITLE			DELETE	6.1 TITL		- 211	Change Addit	ion
NAME				6.2 NAN)		
STREET ADDRESS						ADDRESS		
CITY-ST-ZIP				6.4 C/T)				

14. Thereby 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 royfor of supplemental annual report is true and Securate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the cooperation or the receiver or tries there expressed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if organization with an address.

305-235-1049