SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000097903

VALVERDE PAINTING, INC.

Principal Place of Business

3710 S. 55TH AVE. GREENACRES FL 33463 Mailing Address

P.O. BOX 5795

LAKE WORTH FL 33463

FILED Sep 16, 1999 8:00 am Secretary of State

09-16-1999 90015 002 ***550.00



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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, and accept the obligations of, section 607.0508, Florida Statutes. SIGNATURE Signature, typed or primed name of inspitence agent and tibs it speciation. OFFICIENT SAND DIRECTORS 12. OFFICIENT SAND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE PD ORE VALVERDE, PABLO 12. TITLE VALVERDE, PABLO 13. TITLE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE VALVERDE, PABLO 13. TITLE 12. ANDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE VALVERDE, PABLO 13. TITLE 12. ANDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition MALURISCE VALVERDE, PABLO 13. TITLE 13. TITLE 13. TITLE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition MALURISCE VALVERDE, PABLO 14. CITYST2P 15. TITLE 1	1001					treet Addre	et Address (P.O. Box Number is Not Acceptable)				
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11. Pursuant to the provisions of sections 607 0502 and 607 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, section 607 0505. Florida Statutes. SIGNATURE SIGNATURE Signature, speed or protect have obligations of, section 607 0505. Floridas Statutes. OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD				i	ا"						
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 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, 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, and accept the obligations of, section 607.050S, Piorida Statutes. SIGNATURE Signature, typed or printed name of registered agent and tale if appointment.				ţ	84 C	ity		1	85	Zip Code	
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TITLE	SIGNATURE	Signature, typed or printed name of registered agent	ed Agent	signature requir	red when reinstating)		DATE				
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	14 I hereby ce	rtify that the information supplied with	this filing does not qualify for the			ted in section	on 119.07(3)(i) F	orida Statutes. I furthe	er certify that the	he information	

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.

SIGNATURÉ