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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Matheson Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V39661 (6)

1. Corporation Name
ENRICO'S PAINTING, INC.

Principal Place of Business 2846 S.W. 50TH TERRACE CAPE CORAL FL 33914 US	Mailing Address 2846 S.W. 50TH TERRACE CAPE CORAL FL 33914 US
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DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 05/29/1992	3a. Date of Last Report 05/01/1994
21. 2846 S.W. 50th Ter.	26. SAME AS F-1	4. FEI Number 65-0337910	Applied For <input type="checkbox"/> Not Applicable
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23. CAPE CORAL FL	28. City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. 33914	29. FL	30. Country	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent ENRICO, RAYMOND FRANK 2846 S.W. 50TH TERRACE CAPE CORAL FL 33914	10. Name and Address of New Registered Agent
81. Name	82. Street Address (P.O. Box Number is Not Acceptable)
83. City	84. City
	85. Zip Code FL

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 _____ (Signature typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when resigning) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	NAME ENRICO, RAYMOND FRANK	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 2846 S.W. 50TH TERRACE	CITY-ST-ZIP CAPE CORAL FL	12 NAME	
TITLE SD	NAME ENRICO, MARLENE	13 STREET ADDRESS	
STREET ADDRESS 2846 S.W. 50TH TERRACE	CITY-ST-ZIP CAPE CORAL FL	14 CITY-ST-ZIP	
TITLE VPO	NAME ENRICO ANTHONY L.	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 2846 S.W. 50TH TERRACE	CITY-ST-ZIP CAPE CORAL FL	22 NAME	
TITLE TD	NAME ENRICO, RAYMOND R	23 STREET ADDRESS	
STREET ADDRESS 1425 S.E. 19TH LANE	CITY-ST-ZIP CAPE CORAL FL 33990	24 CITY-ST-ZIP	
TITLE	NAME	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	32 NAME	Enrico, Louis Anthony
TITLE	NAME	33 STREET ADDRESS	please correct name
STREET ADDRESS	CITY-ST-ZIP	34 CITY-ST-ZIP	
TITLE	NAME	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	42 NAME	No longer with company
TITLE	NAME	43 STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	44 CITY-ST-ZIP	
TITLE	NAME	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	52 NAME	
TITLE	NAME	53 STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	54 CITY-ST-ZIP	
TITLE	NAME	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	62 NAME	
TITLE	NAME	63 STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(a), 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 omitted attach document with an address.

SIGNATURE: Raymond F. Enrico RAYMOND F. ENRICO 2-28-95 813-540-2111

(Signature typed or printed name of signing officer or director) (Date) (Telephone Number)