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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 464087

4087 (6)

C.& J. PAINTING, INC.

FILED Feb 24 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						1 180(1) \$1010 81111 218	,, 48 14, 1411, 144, 414, 41		, , , , , , , , , , , , , , , , , , ,		
3878 PROSPECT AVE 3878 PROSPECT AVE											
STE 7		STE 7									
RIVIERA BEA	CH FL 33404	_	RIVIERA BEACH FL 33404			DO NOT WRITE IN THIS SPACE					
US		US				3. Date Incorporated of 10/24/1974	r Qualified				
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		A	oplied For		
21		26	6			59-1553078 Not Applicable					
Suite, Apt.	#, etc	Suile, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status	Desired	\$8.75	Additional		
22		27	27			5. Certificate of Status	Desiled [Fee R	equired		
City & State	ė	City & State	City & State			Election Campaign Financing \$5.00 May Be					
23		28				Trust Fund Contribu	tion 📙	Added	to Fees		
Zip	Country	Zip	_	untry		B. This corporation own	,	<u> </u>			
24	25	29	30			Personal Property T			_ No		
e. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent 81 Name					
SCHMIDT, JAMES					Name						
	880 N 169 CT		82 Street Ad			ress (P.O. Box Number is N	ot Acceptable)				
JU	PITER FL 33469			Ш							
				83							
				84	City			B5 Zip	Code		
				1	•	:	F	L []			
11. Pursuant	to the provisions of Sections 60	7 0502 and 607 1508, Florida Stat State of Florida Such change was	utes, the a	above	-named corp	poration submits this statem	ent for the purpose	of changing i	ts registered		
office or r agent. I a	egistered agent, or both, in the im familiar with, and accept the	obligations of, Section 607.0505, I	Florida Sta	atutes	ine corporai i.	tion's board of directors. Th	eleby accept the as	эропшлен аз	registered		
SIGNATURE											
GIGITATORE	Signature, typed or printed name of registe		TE Registere	ed Age	nt signature requi	red when reinstating)	DATE				
12.		S AND DIRECTORS	13.		7	ADDITIONS/CHANGE	S TO OFFICERS AN				
TITLE	SDVP	☐ DELETE		TITLE				Change	Addition		
NAME	SCHMIDT, JAMES		1.2 NAN								
STREET ADDRESS	NINTED EL		STREET	ADDRESS							
CITY-ST-ZIP	JUPITER FL			CITY - S	T-ZIP			l Charac	- Addition		
TITLE				2.1 TITLE		İ		☐ Change	☐ Addition		
NAME				AME	1						
STREET ADDRESS	ss				AODRESS						
CITY-ST-ZIP			2. 4 CITY-ST-2		IT-ZIP			05	- Addition		
TITLE		☐ DELET E	3.11					Change	Addition		
NAME				NAME							
STREET ADDRESS			3.3 9	STREET	ADDRESS	•					
CHTY-ST-ZIP				CITY - S	T-ZIP			1 0	Apparation		
TITLE		☐ DELETE	4.1 ↑					Change	☐ Addition		
NAME				NAME							
STREET ADDRESS					ADDRESS	**************************************					
CITY-ST-ZIP				CITY-S	T-ZIP			D 0	T Kassas		
TITLE		☐ DELETE		TITLE				☐ Change	☐ Addition		
NAME				AME	Ì						
Street address			5.3 5	STREET	ADDRESS						
CITY-ST-ZIP		· -	_	CITY-S	T-ZIP						
TITLE		☐ DELE te	6.1 T	IITLE				Change	Addition		
NAME			6.2 N	NAME		•					
STREET ADDRESS			6.3 9	STREET	ADDRESS						
CITY-ST-ZIP			6.4 0	CITY-S	T-ZIP						

14. I hereby 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 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 on an attachment with an eddress.

Tomac Sal 1+ Nielas 845-0733