## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

465418

(2)

CORAL PAINT AND WALLPAPER,INC.

CONAL	TAINT AND WALL	Aren, INC.						
Principal Place of	of Business	Mailing Addres				- I IBBAL BIBIL DAGU BHA DIDDI IIDI	II 1641 BEBU DIDII DIDII BU	AT OF BAR OLD IN 1881
3877 SOUTH SARASOTA F	TUTTLE		3877 SOUTH TUTTLE SARASOTA FL 34239					
						3. Date Incorporated or Qualified 3a. Date of Last Report 11/25/1974 05/01/1995		
2. Principal Plac	ce of Business	2a. Mailing Ad	dress			4. FEI Number		Applied For
21		26				59-1563562		Not Applicable
Suite, Apt. #	, etc.	Suite, Apt.	#, etc.			5. Certificate of Status Desired	7	5 Additional Required
City & State		City & Stat	e			6. Election Campaign Financing	_ \$5.0	00 May Be
23		28				Trust Fund Contribution		ed to Fees
Zip	Country	Zip		Country		8. This corporation has liability for		s 199.032,
24	25	29	. 3	0		Florida Statutes Yes	No	
	9. Name and Address	of Current Registered Ager		81	Name	10. Name and Address of New F	ealistered when	<del></del>
WACH TO	MODEL MATHEMPINE							
	WSKI, KATHERINE IADOW RIDGE CIR		82 Street Ac		Street Addre	ess (P.O. Box Number is Not Acceptab	Þ(e)	
	TA FL 34240			83				<del></del>
Ontroc	TIN I C OTETO				0.1			r - O- d-
				84	City		FL  85  2	Zip Code
SIGNATURE	Signature, typed or printed name of reg				t signature required	d when reinstaling!	DATE	
12.	· · · · · · · · · · · · · · · · · ·	CERS AND DIRECTORS	T. F.T.C	13.	<del></del>	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECT	
TITLE	V		ELETE	1. 1 TITLE			Change	Addition
NAME	Wasilewski, Krist 7309 Cloister Dr.		•	1.2 NAME 1.3 STREET	YDDDCCC			
STREET ADDRESS CITY-ST-ZIP	SARASOTA, FL 000			1.4 CITY - S				
TITLE	PT		ELETE	2 1 TITLE			☐ Change	Addition
NAME	WASILEWSKI, KATH	ERINE		2.2 NAME				
STREET ADDRESS	1528 SHADOW RIDO			2.3 STREET	ADDRESS			
CITY - ST - ŽIP	SARASOTA, FL 000	00		2.4 D/TY-S	T- <b>Z</b> IP		·····	
TOTLE	\$		ELETE	3. 1 TITLE			Change	<b>Addition</b>
NAME	KOEHLER, LINDA E			3.2 NAME				
STREET ADDRESS	1520 GLEN OAKS D	OK. EA		33 STREE				
CITY-ST-ZIP	SARASOTA FL		ELETE	3.4 CITY - S 4. 1 TITLE	1-ZIP		[ ] Change	Addition
TITLE NAME				4.1 TITLE				
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP				4.4 CITY - S				
TITLE			ELETE	5 1 TITLE			Change	Addition
NAME				5.2 NAME				
STREET ADDRESS				5 3 STREET	ADDRESS			
CITY-ST-ZIP				5.4 CITY - S	T-ZIP			
TITLE		(	ELETE	6. 1 TITLE			☐ Change	Addition
NAME				6.2 NAME				
STREET ADDRESS				6 3 STREET	1			
CITY - ST - ZIP	partify that the information	cumplied with this files is val-	intariki furnich	6.4 DITY-S	S not ouglify f	or the exemption stated in Section 119	1.07(3)(k) Florida Stat	irtes I further
certify that oath: that	the information indicated of am an officer or director of	n this annual report or sumple	mental annual er or trustee ei	report is tru mpowered	ie and accura	ate and that my signature shall have the is report as required by Chapter 607, F	e same legal effect as	i if made under

SIGNATURE: Spin St. KORSISW LINDA E. KOEHLER 4-86-96 941-9240087

CR2E034 (12/95)