

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 10, 2004 8:00 am
Secretary of State

02-10-2004 90014 014 ***150.00

DOCUMENT # 543504

1. Entity Name

PAINT WORLD DISTRIBUTORS, INC.



Principal Place of Business

5020 SOUTH STATE ROAD 7
FT. LAUDERDALE FL 33314

Mailing Address

5020 SOUTH STATE ROAD 7
FT. LAUDERDALE FL 33314

2. Principal Place of Business

8920 S. LAKE DASHA DR

Suite, Apt. #, etc.

3. Mailing Address

8920 S. LAKE DASHA DR.

Suite, Apt. #, etc.



MOORE

CR2E034 (11/03)

City & State

PLANTATION FL

Zip

33324

Country

USA

City & State

PLANTATION FL

Zip

33324

Country

USA

4. FEI Number

59-1769869

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GORDON, MICHAEL
5020 SOUTH STATE ROAD 7
FT. LAUDERDALE FL 33314

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

8920 S. LAKE DASHA DR.

City

PLANTATION, FL

FL

Zip Code

33324

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/4/04

FILE NOW!!! FEE IS \$150.00

After May 1, 2004: Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete

NAME GORDON, MICHAEL
STREET ADDRESS 5020 S. STATE ROAD 7
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS 8920 S. LAKE DASHA DR.
CITY-ST-ZIP PLANTATION, FL 33324

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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TITLE ☐ Change ☐ Addition

NAME
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Michael Gordon MICHAEL GORDON

Date

Daytime Phone #

2/4/04 954 370/1133