

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 24, 2001 8:00 am**  
**Secretary of State**

05-24-2001 90499 010 \*\*\*550.00

**DOCUMENT # 564848**

1. Entity Name

**PLAZA PAINT & DECORATING CENTERS, INC.**

Principal Place of Business

1330 SW 34TH STREET  
 PALM CITY FL 34990  
 US

Mailing Address

1330 SW 34TH STREET  
 PALM CITY FL 34990  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-1794311**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEMS**  
**1200 SPOTU PINE ISLAND ROAD**  
**PLANTATION FL 33324**

Name

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

City

**FL**

Zip Code

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.

SIGNATURE

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

(NOT)

Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☒

**FILE NOW !! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Delete  
 NAME **PTD**  
 STREET ADDRESS **WELLS, ERIC**  
 CITY-ST-ZIP **8542 BELFRY PLACE**  
**PORT ST LUCIE FL 34986**

TITLE ☐ Change ☐ Addition  
 NAME **President**  
 STREET ADDRESS **Adam Janovic**  
 CITY-ST-ZIP **51 Chestnut Ridge Road**  
**Montvale, NJ 07645**

TITLE ☒ Delete  
 NAME **VS**  
 STREET ADDRESS **BOWERS, LISA W.**  
 CITY-ST-ZIP **728 MICHAELS COURT**  
**STUART FL**

TITLE ☐ Change ☐ Addition  
 NAME **Vice President**  
 STREET ADDRESS **Charles Szeglas**  
 CITY-ST-ZIP **51 Chestnut Ridge Road**  
**Montvale, NJ 07645**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME **Secretary**  
 STREET ADDRESS **Joanna Blacum**  
 CITY-ST-ZIP **51 Chestnut Ridge Road**  
**Montvale, NJ 07645**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME **Treasurer**  
 STREET ADDRESS **Daniel J. Corcoran**  
 CITY-ST-ZIP **51 Chestnut Ridge Road**  
**Montvale, NJ 07645**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. 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 the signature of the corporation or the receiver or trustee empowered to execute this report is required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**@ 5/21/01**

Date

Daytime Phone #

CR2E034 (10/00)

0437695