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

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Mar 03 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # 1. Corporation Name

570713

(8)

**DENMARK PAINTING, INC.** 

Principal Plac	e of Business	Mailing Address				
875 - 11TH DRIVE P. O. BOX 304						
VERO BEACH FL 32960 US		VERO BEACH FL 32961 US		DO NOT WRITE IN THIS SPACE		
05		•			3. Date Incorporated or Qualified	
** * * * * * * * * * * * * * * * * * * *					04/21/1978	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
Suite, Apt.	# atc	Suite, Apt. #, etc.	<del> </del>		59-1820355	Not Applicable
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	<del></del>	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip <b>24</b>	Country 25	Zip 29	Country 30	У	This corporation owes or has paid the Personal Property Tax due June 30.	
g, Name and Address of Current Registered Agent					10. Name and Address of New Register	
EV	ANS, RALPH L		81	Name		
	<b>СЕТИТИКА СОТ</b> . 3355 Ос		82	Street Add	dress (P.O. Box Number is Not Acceptable)	
XX.	<b>NORTH RESIDENCE</b> Vero Be	ach, FL 32963				
			83			
			84	City		85 Zip Code
11 Pursuant t	to the provisions of Sections 607 0502	and 607 1508 Florida State	itos, the abov	no named cor	rporation submits this statement for the purpose	
office or ri	egi <b>stere</b> d agent, or both, in the State o	of Florida. Such change was	authorized by	v the corpora	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	e of changing its registered appointment as registered
_	m familiar with, and accept the obligat	tions of, Section aux.0505, in	TOTICE Statutes	S.		
SIGNATURE	Signature, typed or printed name of registered agent	it and title if applicable. (NC	TE: Registered Agr	ent signature requ	uired when reinstating) DATE	E
12.	OFFICERS AND	·····	13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PD DELETE		1.1 TITLE			☐ Change ☐ Addition
NAME	DENMARK, THOMAS	1-4 0- 0 11	1.2 NAME			
STREET ADDRESS		lst Sq. S.W. 32968	1.3 STREET			
CITY-ST-ZIP TITLE	STD	DELETE	1.4 CITY - S 2.1 TITLE	57 - ZIP		Change Addition
NAME	DENMARK, PAMELA		2.2 NAME			□ Ottalige □ Nubition
STREET ADDRESS	<b>XXX.237XXDR</b> 5645-W. 1st Sq. S.W.		2.3 STREET	ADDRESS		
CITY-ST-ZIP	VERO BEACH, FL 00000 32968		2. 4 CITY - 5		• •	
TITLE		DELETE		<u> </u>		Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET	ADDRESS		
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY - S	iT - ZiP		
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-\$T-ZIP		- OCIETE	5.4 CITY-S	T-ZIP		
TITLE		☐ DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME STREET ADDRESS			6.2 NAME 6.3 STREET	***********		
STREET NUMBERS			B 63 SIREL	ADDIRESS I		

6.4 CHTY-ST-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 13 if changed or on an attachment with an address.