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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Oct 01 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

Y TINAËNIT #

1. Corporation		# 65560 PAINTING, INC.)4	(7)						
Principal Plac	ce of Busines		<u>M</u>	Mailing Address				!	l Djen sien slen	
2411 N.W. 16TH LANE POMPANO BEACH FL 33064			1	2411 N.W. 16TH LANE POMPANO BEACH FL 33064				DO NOT WRITE IN THI S S PACE		
	•							3. Date Incorporated or Qualified		
2. Principal I	Place of Busin	ness	2a.	Mailing Address				02/12/1980 4. FEI Number	- 1 1	pptied For
21			26	26				59-1958191	 	lot Applicable
 Suite, Apt 	#, etc.			Suite, Apt. #, etc.						Additional
22			27	······································				5. Certificate of Status Desired		Required
City & Sta			28					Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip 24	Country 25			Zip Country 30			8. This corporation owes or has paid the cufrent year intangible Personal Property Tax due June 30. Yes No			
		and Address of Curre	nt Regist	tered Agent		т		10. Name and Address of New Registere	d Agent	
		er, stephen a			81	Name	;			
8530 NW 21 MANOR CORAL SPRINGS FL 33071					82	Street	. Addres	ss (P.O. Box Number is Not Acceptable)		
,	OUIPE OIL	MIGO I E GODI I			83					
					84	City		F	85 Zip	Code
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the a						e-named	d corpor	ation submits this statement for the nurnose	of changing i	ite registared
office or agent 1 a	regi ste red aç am fam iliar wi	ent, or both, in the State ith, and accept the oblic	e of Florid gations of	la. Such change was , Section 607.0505, F	authorized by lorida Statute	y the corp s.	poration	n's board of directors. I hereby accept the ap	p po intment as	registered
SIGNATURE	Sign ature , typic d	or printed name of registered ag	gent and title	if applicable (NO	Tf. Registered Age	ent signature	o required s	when reinstating) DATE		
12.				ID DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AI	N D DIRECTOR	RS IN 12
Title	PD		_	☐ DELETE	1.1 TIFLE		Ţ		Change	Addition
NAME		YEDDER, STEPHEN A	•		1.2 NAME					
STREET ADDRESS		NW 21 MANOR			1.3 STREET					
CITY-ST-ZIP TITLE	LUM	L SPRINGS FL		DELETE	1.4 CITY - S	T-ZIP	 		Change	Addition
NAME	•			□ Marit	2.1 TITLE				L Change	☐ Addition
STREET ADDRESS					2.2 NAME	*nontee				
CHY-SI-ZIP					2.3 STREET 2.4 City-5					
TITLE				DELETE	3 1 TITLE	51-Zir	 		Change	Addition
NAME					3.2 NAME					band - 1
STREET ADDRESS					3.3 \$1RFET	ADDRESS			•	
CITY-ST-ZIP					3.4. CITY - 5	31 - ZIP				
TITLE				DELETE	4.1 TITLE				Change	Addition
NAME	ļ				4. 2 NAME					
STREET ADDRESS					4.3 STREFT	ADDRESS			•	
CITY-ST-ZIP		- 		T cours	4.4 CITY - S	T - ZIP	ļ			
TOTLE				☐ DELETE	5.1 TITLE				Change	Addition .
NAME CTRLET ADDRESS					5 2 NAME					
STHEET ADDRESS					5.3 STREET	- 1				
CITY-ST-ZIP				DELFTE	5.4 CITY-S	T - 7(P	 		Chanas	Addition 1
NAME	İ			□ bettie	6.1 TITLE				Change	☐ Addition
STREET ADDRESS					6.2 NAME 6.3 STREET	ADDRESS		•		
CITY-ST-ZIP	,				6.4 CITY - S					

14. Thereby 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an appearance with an address.

6.4 CITY-ST-ZIP