2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

DOCUMENT #

Principal Place of Business

SIGNATURE:

684179

1. Entity Name

ARNOLD PAINT AND WALLPAPER, INC.



FILED May 01, 2003 8:00 am Secretary of State

05-01-2003 90965 038 ***163.75

ORLANDO FL 32803		C/O RAPPORATE ANDRE BUIL ORLANDO FL 32803					
2. Principal F	Place of Business, N. Bumbi Ave	3. Mailing Address 538 N Ru	unby Av	,	t contro micht forfit depet exert fibi		B) D) I BIBN NBDI
Suite, Apt.		Suite, Apt. #, etc.			CHECK HERE	IF MAKING CHANGES	,
City & Stat	indo FL 32803	Orlando, F	7		4. FEI Number 59-2013459	N	pplied For ot Applicable
_ 32 5 0	3 Country Orange	35803	Country	e_	5. Certificate of Status Desired	\$8.75 Ad Fee Require	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent							
STUK, RA 538 N. BI ORLANDO	Street Address (P.O. Box Number is Not Addeptable) 538 M. Sumay Free						
· ·			City ()	Mana		FL Zip Coo	En 3
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: typic obligations of registered agent agent and title explicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be							
Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fo							d to Fees
10.	OFFICERS AND D	IRECTORS	11.		ADDITIONS/CHANGES TO OFF	CERS AND DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Stuk, ralph:david 538 n. Bumby Avenue Orlando fl	∇ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ANDI 538 Orla	N. Bumby Av		Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST STUK, NANCY J.H. 538 N. BUMBY AVENUE ORLANDO FL	Dolete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	√0 53	F President N Quang 8 N. Bunday Ar ando FL 32503	Change	☑ Addition 2
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	22.22	HUDNG NGLYGE N. BUMBY AVE udo, FL 32803	Change	☑ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Davis 538 Orla	N. Bumby Ave ndo. FL 32803	- 🗹 Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
12. I hereby certify that the information supplied with this filling 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 of sustee 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.							

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR