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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 22 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F9300000389 (7)

## SERVICE PAINTING COMPANY OF CORPUS CHRISTI

	O. BOX 306 AUMONT TX		P. O. BOX 306 BEAUMONT TX 77704-0306 US							
00	1		00				3. Date Incorporated or Qualified 01/25/1993		ate of Last Re 19/1996	eport
	Principal Pl	lace of Business	2a. Mailing Address	***********			4. FEI Number			oplied For
21			26				76-0042592		No	ot Applicable
22	Suite, Apt #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 / Fee Re	
23	City & State	28					Election Campaign Financing     Trust Fund Contribution		\$5.00 Added t	
	Ζφ	Country	Ziρ	Count	ry		8. This corporation has tiability for i			. 199.032,
24		25	29 30	o				] Yes [		
		9. Name and Address of Current	Registered Agent	8	al Mor		10. Name and Address of New Re	gistered /	Agent	
		CORPORATION SYSTEM		6	1 Nar	ne				
		S. PINE ISLAND RD.		<b>82</b> S			ess (P.O. Box Number is Not Acceptab	le)		<del></del>
	PLA	NTATION FL 33324		8:					<del></del>	<del></del>
				D.	3					
				8	4 City	,		FL	<b>85</b> Zip (	Code
11	Pursuant /	to the provisions of Spetions 607.0500	and 607 1508 Florida Statutes	the abn		and corne	oration submits this statement for the p		shanging it	registered
• •	office or re agent. I ai	egistered agent, or both, in the State of familiar with, and accept the obligations.	of Florida. Such change was aut tions of, Section 607.0505, Florid	horized to da Statut	by the cost.	corporation	on's board of directors. I hereby accep	it the app	ointment as	registered
SI	GNATURE	Signature, typed or printed hance of registered agen	t and the if applicable (NOTE: I	Registered A	nent sign	ah ire require	od when reinstating)	DATE	·	***************************************
12		OFFICERS AND		13.	April ma	actio ragana	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	S IN 12
Till	·	CD	DELETE	1.1 TITLE		$\neg$			Change	Addition
NA	ME	BROCK, JERROLD		1.2 NAME						
STF	REET ADDRESS	1670 E. CARDINAL DR.		1.3 STREET ADDRES		ss				
	(Y-S1-2:F'	DEALISONE TV 77705		1.4 CITY		<u> </u>				
Fill		P	DELETE	2.1 TITLE		$\neg$			Change	☐ Addition
NAI	ME	DAVIS, JEFFREY		2.2 NAMI	2.2 NAME					
STREET ADDRESS		1670 E. CARDINAL DR.		2.3 STRE	ET ADDRE	ss				
CIT	IY-SI-71P	BEAUMONT TX 77705		2. 4 CITY		`` <b> </b>				
ŢIŢ		WCD DELETE		3.1 TITL€		1			Change	Addition
NA	ME	BROCK, BRANDEN		3.2 NAM	E					
STI	REET ADORESS	1670 E. CARDINAL DR.		3.3 STRE	ET ADDRE	.ss .				
CIT	TY-ST-ZIP	BEAUMONT TX 77705		3.4. CITY	-ST-ZIP		1			
TIT	LE	STD	☐ DELETE	4.1 TITLE					Change	Addition
NAI	ME	DUCHARME, LARRY		4. 2 NAM	1E					
ST	REET ADDRESS	1670 E. CARDINAL DR.		4.3 STRE	et addre	iss				
CIT	TY - S1 - ZIP	BEAUMONT TX 77705		4.4 City	-ST-ZiP					
TIT	ΊΕ		☐ DELETE	5 1 TITLE					☐ Change	Addition
NA	ME			5.2 NAM	E					
Sff	REET ADDRESS			53 STRE	ET ADDRE	ss				
CIT	TY-S1-ZIP			5.4 CiTY	- ST-ZIP					
TITLE			☐ DELETE	61 TITLE	-	1	MARKET PROVIDE AND THE PROPERTY AND THE		Change	Addition
NA	ME	1		62 NAM	E					
ST	REET ADDRESS			6.3 STRE	ET ADDRE	ss				
CIT	IY-SI- <i>7</i> (P			64 CITY	· ST - ZIP	1				
14	I do heret	by certify that the information supplied	with this filing does not qualify	for the ex	kemptic	n stated	in Section 119.07(3)(i), Florida Statute my signature shall have the same lega	s. I furthe	r certify that	the
	Lani an o	on indicated on this arinual report or si officer or director of the corporation or	upplemental annual report is trui the receiver or trustee empower	e and acr	curate acute ti	ano man nis report	my signature shall have the same lega t as regulred by Chapter 607, Florida S	il eneci as Statutes: a	and that my r	oeroam; ma name