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Mar 11 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F96000001200 (2)

1. Corporation Name

COAST TO COAST COMMERCIAL PAINTING, INC.



Principal Place of Business

13540 E. BOUNDARY RD.  
MIDLOTHIAN VA 23112

Mailing Address

13540 E. BOUNDARY RD.  
MIDLOTHIAN VA 23112-3930

3. Date Incorporated or Qualified

03/08/1996

3a. Date of Last Report

2. Principal Place of Business

21 13531 E. Boundary Rd.  
Suite, Apt. #, etc.

22 Suite D  
City & State

23 Midlothian, VA  
Zip Country

24 23112  
25

2a. Mailing Address

26 13531 E. Boundary Rd.  
Suite, Apt. #, etc.

27 Suite D  
City & State

28 Midlothian, VA  
Zip Country

29 23112  
30

4. FEI Number

54-1674034

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

ESQUIVEL, SANTIAGO  
2280 WOODWIND TRIAL #1207  
MELBOURNE FL 32835

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PV ☐ DELETE

NAME CEDERO, MANUEL  
STREET ADDRESS 2309 ARROWOOD RD  
CITY - ST - ZIP MIDLOTHIAN VA 23112

TITLE ST ☐ DELETE

NAME CEDERO, NURIA  
STREET ADDRESS 2309 ARROWOOD RD  
CITY - ST - ZIP MIDLOTHIAN VA 23112

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PV ☐ Change ☐ Addition

1.2 NAME Cedeño, Manuel  
1.3 STREET ADDRESS 2309 Arrowood Rd.  
1.4 CITY - ST - ZIP Midlothian, VA 23112

2.1 TITLE ST ☐ Change ☐ Addition

2.2 NAME Cedeño, Nuria  
2.3 STREET ADDRESS 2309 Arrowood Rd.  
2.4 CITY - ST - ZIP Midlothian, VA 23112

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

14. I do 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Nuria Cedeño*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/18/97

(804) 744-9611

Date

Daytime Phone #

CR2E034 (9/96)