

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

FILED  
May 11 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **G86550** (2)

1. Corporation Name  
**SAMIOTIS PAINTERS, INC.**



Principal Place of Business <b>2649 SE SOLANA LN. (PORT ST LUCIE, FL) P.O. BOX 230 STUART FL 34995</b>	Mailing Address <b>2649 SE SOLANA LN. (PORT ST LUCIE, FL) P.O. BOX 230 STUART FL 34995</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>3300 SW MAPLE RD.</b> Suite, Apt. #, etc. 22 <b>PALM CITY, FL</b> City & State 23 Zip 24 <b>34990</b>		2a. Mailing Address 26 <b>P.O. BOX 230</b> Suite, Apt. #, etc. 27 <b>STUART, FL</b> City & State 28 Zip 29 <b>34995</b>		3. Date Incorporated or Qualified <b>02/27/1984</b>	
Country 25 <b>MARTIN</b>		Country 30 <b>MARTIN</b>		4. FEI Number <b>59-2390123</b> Applied For <input checked="" type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>SAMIOTIS, JOHN &amp; MARY BETH 2649 S.E. SOLANA LN. PORT ST. LUCIE FL 34952</b>				10. Name and Address of New Registered Agent			
				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SAMIOTIS, JOHN</b>	1.2 NAME	
STREET ADDRESS	<b>2649 S.E. SOLANA LN.</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>PORT ST. LUCIE FL</b>	1.4 CITY-ST-ZIP	
TITLE	ST	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SAMIOTIS, JOHN</b>	2.2 NAME	
STREET ADDRESS	<b>2649 S.E. SOLANA LN.</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>PORT ST. LUCIE FL</b>	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE \_\_\_\_\_

CR2E034 (10/97)