

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # G87184

(9)

1. Corporation Name
MIRACLE PAINTING, INC.

FILED

97 AUG 11 PM 11:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

Mailing Address

4111 N. 66 AVENUE
HOLLYWOOD FL 33024

4111 N. 66 AVENUE
HOLLYWOOD FL 33024

6427 Toulon Dr
Boca Raton FL 33433

6427 Toulon Dr
Boca Raton FL 33433

2. Principal Place of Business

2a. Mailing Address

21 6427 Toulon Dr

26 6427 Toulon Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Boca Raton

28 Boca Raton

Zip

Country

Zip

Country

24 33433

25 P. BEACH

29 33433

30 P. BEACH

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent



Claire Socquet
6427 Toulon Dr.
Boca Raton, FL 33433

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D.
NAME
STREET ADDRESS
CITY - ST - ZIP



Claire Socquet
6427 Toulon Dr.
Boca Raton, FL 33433

DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

000002267600-1
-08/14/97-01126-013
****165.00 ****165.00

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.

CLAIRE SOCQUET

CR2E034 (4/97)

pg. 2

7/24/97

Miracle Painting
6427 Toulon Dr.
Boca Raton, FL 33433

I NEVER RECEIVED THE
NOTICE.

THIS IS THE FIRST TIME
THIS WEEK, I HAVE NOTICE
SOMETHING I DIDN'T NO

Thank you very
much!

I am send you.
a check for \$165.00.

I call and they told me
to do that.