2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H22967 Apr 26, 2000 8:00 am Secretary of State PAT PAULIN AND SON PAINTING AND DECORATING, INC. 04-26-2000 90174 042 ***150.00 Mailing Address Principal Place of Business % PAUL PATRICK PAULIN % PAUL PATRICK PAULIN 1142 OLD OKEECHOBEE RD 1142 OLD OKEECHOBEE RD WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2569415 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired - . Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PAULIN, PAUL PATRICK Street Address (P.O. Box Number is Not Acceptable) 1142 OLD OKEECHOBEE RD WEST PALM BEACH FL 33401 City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. Change ☐ Addition ☐ Delete TITLE TITLE DEVANE, MARY PAULIN NAME NAME STREET ADDRESS 1142 OLD OKEECHOBEE RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL ☐ Delete Change ☐ Addition NAME PAULIN, ROBERT W. NAME 1142 OLD OKEECHOBEE RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP W. PALM BEACH FL Change ☐ Addition ☐ Delete TIT) F TITLE NAME PAULIN, PAUL PATRICK NAME STREET ADDRESS 1142 OLD OKEECHOBEE RD. STREET ADDRESS CITY-ST-ZIP W. PALM BEACH FL CITY-ST-ZIP ST ☐ Delete ☐ Change ☐ Addition TITLE TITLE DEVANE, MARY PAULIN NAME NAME STREET ADDRESS 1142 OLD OKEECHOBEE RD STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP W PALM BCH FL 33401 ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME

13. 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 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: Mary Paulin Dellane Hary Paulin Devane 4/20/00 56/833 6754

CR2E034 (9/99)