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

CORPORATION ANNUAL REPORT

1997

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H82031

(6)

AMORE PAINTING COMPANY

FILED

Apr 28 1997 8:00am

Secretary of State

Principal Pia	ice of Business	Mailing Address					PIP(918) #F#F		
1590 Greenf Page FL 325' US		1590 GREENFIELD STR PACE FL 32571-9306 US							
•				3. Date Incorporated or Qualified 10/11/1985	3a. Date 06/19		leport		
2. Principal	Place of Business	2a. Mailing Address	***		······································	4. FEI Number			oplied For
		26				59-2601043		N	ot Applicable
Suite, Apl	I#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional equired
City & Sta	ite	City & State			· · · · · · · · · · · · · · · · · · ·	Election Campaign Financing Trust Fund Contribution			May Be to Fees
Z(p	Country	Zip		untry		8. This corporation has liability for in	ntangible ta		
	25	29	30				Yes 🗖		
	9. Name and Address of Cur	rent Registered Agent		81		10. Name and Address of New Reg	platered Ag	ent	
MATTHEWS, EDSEL F., JR.					Name				
308 SOUTH JEFFERSON STREET PENSACOLA FL 32501				82	Street Addi	ress (P.O. Box Number is Not Acceptable	le)		
					Oli Out 7100	to the contraction of the recognition	.~,		
				83					
				B4	City		T	85 Zip	Code
					i		FL I	BO ZIP	C006
office or	registered agent, or both, in the St am familiar with, and accept the ot	late of Florida, Such change was oligations of, Section 607.0505, F	s authorize Florida Sta	ed by atutes	the corporat	oration submits this statement for the pi lion's board of directors. I hereby accep	urpose of ct t the appoir	nanging i ntment as	is registered registered
	Signature, typical or purited nation of registered	Largest and title if anythrophic PM6	TIE: Registers					· · · · · · · · · · · · · · · · · · ·	
					int signature requi	ed when reinstating)	DATE		
		AND DIRECTORS	13.		int signature requi	ed when reinstatings ADDITIONS/CHANGES TO OFFICE	ERS AND D		
T) f	PD		13. 1.1 T	TITLE	ent signature requi		ERS AND D	IRECTOF	
ITLE IAME	PD AMORE, FRANK	AND DIRECTORS	13. 1.1 T 1.2 N	TITLE NAME			ERS AND D		
STEF IAME OPELIADORESS	PD AMORE, FRANK 1590 GREENFIELD ST.	AND DIRECTORS	13. 1.1 T 1.2 N	TITLE NAME	ADDRESS		ERS AND D		
TLE AME OFFET ADDRESS OY - SE-70°	PD AMORE, FRANK 1590 GREENFIELD ST. PACE FL	AND DIRECTORS DELETE	13. 1.1 T 12 N 1.3 S 1.4 C	TITLE NAME STREET CITY-S	ADDRESS		ERS AND D	Change	Addition
TLE AME OFFET ADDRESS OY - SE-70°	PD AMORE, FRANK 1590 GREENFIELD ST. PACE FL V	AND DIRECTORS	13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T	TITLE NAME STREET CITY-S	ADDRESS		ERS AND D		Addition
TLE AME CHELADORESS CLYSE ZIE CLE	PD AMORE, FRANK 1590 GREENFIELD ST. PACE FL V BRIDGET, MARIE A	AND DIRECTORS DELETE DELETE	13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T	TITLE NAME STREET CITY-S	ADDRESS		ERS AND D	Change	
TLE ME GRELADORESS TY-SE-ZIE TLE MME	PD AMORE, FRANK 1590 GREENFIELD ST. PACE FL V BRIDGET, MARIE A 1590 GREENFIELD STREET	AND DIRECTORS DELETE DELETE	13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N	TITLE NAME STREET CITY-S TITLE	ADDRESS	ADDITIONS/CHANGES TO OFFIC	ERS AND D	Change	Addition
TLE WHE TADDRESS TY SE ZIP TLE WHE TADDRESS TY SE ZIP	PD AMORE, FRANK 1590 GREENFIELD ST. PACE FL V BRIDGET, MARIE A	AND DIRECTORS DELETE DELETE	13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 4	TITLE NAME STREET CITY-S TITLE NAME STREET	ADDRESS 1- ZIP ADDRESS		ERS AND D	Change	Addition
STE AME OFFEE ADDRESS OFFEE ADDRESS AME TREET ADDRESS ITY: \$1, 200	PD AMORE, FRANK 1590 GREENFIELD ST. PACE FL V BRIDGET, MARIE A 1590 GREENFIELD STREET	AND DIRECTORS DELETE DELETE	13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 4	TITLE NAME STREET CITY-S TITLE NAME STREET	ADDRESS 1- ZIP ADDRESS	ADDITIONS/CHANGES TO OFFIC	ERS AND D	Change	Addition
STE AME OFFET ADDRESS OFFE SE VIE OFFE BAME DIPEET ADDRESS OFFE SE VIE OFFE OFFE OFFE OFFE OFFE OFFE OFFE OF	PD AMORE, FRANK 1590 GREENFIELD ST. PACE FL V BRIDGET, MARIE A 1590 GREENFIELD STREET	AND DIRECTORS DELETE DELETE	13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 I 3.1 T	TITLE NAME STREET CITY-S TITLE NAME STREET	ADDRESS 1- ZIP ADDRESS	ADDITIONS/CHANGES TO OFFIC	ERS AND D	Change	Addition
ELLE AME FRELADORESS GYESE ZIP DLE AME IPPELATORESS ILY: \$1, ZIP ILLE AME	PD AMORE, FRANK 1590 GREENFIELD ST. PACE FL V BRIDGET, MARIE A 1590 GREENFIELD STREET PACE FL	AND DIRECTORS DELETE DELETE	13.1 1.1 T 12 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 H 3.1 T	TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE	ADDRESS 1- ZIP ADDRESS	ADDITIONS/CHANGES TO OFFIC	ERS AND D	Change	Addition
STE JAME OPEL ADDRESS OTY SE VIE OFFE O	PD AMORE, FRANK 1590 GREENFIELD ST. PACE FL V BRIDGET, MARIE A 1590 GREENFIELD STREET PACE FL	AND DIRECTORS DELETE DELETE	13. 1.17 12.N 1.3.S 1.4.C 2.17 2.2.N 2.3.S 2.4.1 3.17 3.2.N 3.3.S	TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS	ADDITIONS/CHANGES TO OFFIC	ERS AND D	Change	Addition
ERLE JAME SOFFE LADDELSE DELY SE ZE JEME SEPET ADDELSE DELY SE ZE JEME JAME STREET ADDELSE JEME J	PD AMORE, FRANK 1590 GREENFIELD ST. PACE FL V BRIDGET, MARIE A 1590 GREENFIELD STREET PACE FL	AND DIRECTORS DELETE DELETE	13. 1.17 12.N 1.3.S 1.4.C 2.17 2.2.N 2.3.S 2.4.1 3.17 3.2.N 3.3.S	TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S GITY-S CITY-S	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS	ADDITIONS/CHANGES TO OFFIC	ERS AND D	Change	Addition
12. DAME SCHELLANDRESS CHY-SE-ZHE TOLLE NAME STREET ACORESS CHY-SE-ZHE TILLE NAME STREET ACORESS CHY-SH-ZHE TILLE	PD AMORE, FRANK 1590 GREENFIELD ST. PACE FL V BRIDGET, MARIE A 1590 GREENFIELD STREET PACE FL	AND DIRECTORS DELETE DELETE	13. 1.17 12.N 1.3.S 1.4.C 2.17 2.2.N 2.3.S 2.4.1 3.2.N 3.3.S 3.4.4.1	TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S GITY-S CITY-S	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS	ADDITIONS/CHANGES TO OFFIC	ERS AND D	Change Change	Addition

64 CITY-ST-ZIP

14. It do hereby cert ly that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3Xi). 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 are 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, of on an attachment with an address.

44 CITY-ST-ZIP

5 4 CITY - ST - ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME 63 STREET ADDRESS

City-St-7

STREET LADDRESS

STREET ADDRESS

 $C(1)\cdot S^*\cdot 71^5$

TILLE

NAME

DELETE

DELETE

But Frank Amore

Change

Change

Addition

Addition