

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

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May 17, 1999 8:00 am
Secretary of State

05-17-1999 90046 008 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Sandra B. Mathiam Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # J34411 (5) 1. Corporation Name VIC'S PAINTING INC.					

Principal Place of Business 5430 DIVISION DRIVE FT MYERS FL 33905	Mailing Address 5430 DIVISION DRIVE FT MYERS FL 33905
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2. Principal Place of Business		3a. Mailing Address	
21		25	
Bldg., Apt. #, etc.		Bldg., Apt. #, etc.	
22		27	
City & State		City & State	
23		28	
Zip		Zip	
24		29	
Country		Country	

9. Name and Address of Current Registered Agent HEIN, VICTOR J. 628 S.E. 12TH AVENUE CAPE CORAL FL 33904	
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3. Date Incorporated or Qualified 09/18/1986	
4. FEI Number 59-2721839	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 owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☒ No	

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 607.0605, Florida Statutes.

SIGNATURE _____ (Signature, typed or printed name of registered agent and date if applicable) (NOTE: Registered Agent signature required when necessary) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	PD ☐ DELETE
NAME	HEIN, VICTOR J.
STREET ADDRESS	628 S.E. 12TH AVENUE
CITY-ST-ZIP	CAPE CORAL FL
TITLE	STD ☐ DELETE
NAME	HEIN, KENT W.
STREET ADDRESS	3915 SE 2ND AVENUE
CITY-ST-ZIP	CAPE CORAL FL
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. TITLE	☐ Change ☐ Addition
1.1 NAME	
1.2 STREET ADDRESS	
1.3 CITY-ST-ZIP	
2. TITLE	☐ Change ☐ Addition
2.1 NAME	
2.2 STREET ADDRESS	
2.3 CITY-ST-ZIP	
3. TITLE	☐ Change ☐ Addition
3.1 NAME	
3.2 STREET ADDRESS	
3.3 CITY-ST-ZIP	
4. TITLE	☐ Change ☐ Addition
4.1 NAME	
4.2 STREET ADDRESS	
4.3 CITY-ST-ZIP	
5. TITLE	☐ Change ☐ Addition
5.1 NAME	
5.2 STREET ADDRESS	
5.3 CITY-ST-ZIP	
6. TITLE	☐ Change ☐ Addition
6.1 NAME	
6.2 STREET ADDRESS	
6.3 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)(f), 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: Victor J. Hein 5/11/99 1941-694-3/31
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAY AND MONTH YEAR 0425277