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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

1999 DOCUMENT # 1/74

BOYT PAINTING INC.

CITY-ST-ZIP

SIGNATURE: 3

DOCUMENT	#	K /	1.52
Corporation Name		1 11	

FILED Mar 13, 1999 8:00 am Secretary of State

03-13-1999 90007 019 *****8.75 03-13-1999 90007 020 ***150.00

	-	•-	_ , ~ —			
Principal Place	of Business	Mailing Address		יים וותחום נוחום הוחום ושנו ושתון מנונה וחתון נפשמה ווא אותומושון ל	 	
2177 S TAMIAM	II TR	2177 S TAMIAMI TR				
UNIT 7		UNIT 7		DO NOT WRITE IN THIS SPACE		
VENICE FL 3429 US	93	VENICE FL 34293 US		3. Date Incorporated or Qualifed		
US		00		03/09/1989	1	
2 Principal Pl	ace of Business	2a. Mailing Address			Applied For	
21	300 0. 200,	26		59-2689500	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		\$8.75	Additional	
22		27		5. Certificate of Status Desired K Fee F	Required	
City & State	9	City & State		6. Election Campaign Financing \$5.00	May Be	
23		28		Trust Fund Contribution Added	to Fees	
Zip	Country	Zip Country		8. This corporation owes the current year Intangible		
24		29 30	<u> </u>	Personal Property Tax. Yes	□No	
	9. Name and Address of Curre	int Registered Agent	81 Name C	10. Name and Address of New Registered Agent		
BOV	T, JAMES W.		Name (HAY J. Bout (Secret	ary	
	I, JAMES W. I S. TAMIAMI TRAIL		82 Street Ad	dress (P.O. Box Number is Not Acceptable)		
	CE FL 34293		83 8 17	J. S. Tamiami Trail - Unit		
YEN	OL 1 L 04233		83	· ·		
			84 City \\	FL 85 Zi	Code	
		TOO LOOK STANDS TO STAND	1 1	poration submits this statement for the purpose of changing i		
office or n	egistered agent, or both, in the State	e of Florida. Such change was auth	orized by the corpora	tion's board of directors. I hereby accept the appointment as	registered -	
agent. I a	m familiar with, and accept the oblig	jations of, Section 607.0505, Florida	a Statutes.	7 9 00		
SIGNATURE	Signature, typed or printed name of relistered ag	pent and title if applicable. (NOTE: Re-	gistered Agelt signature requi	red when reinstating) DATE		
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECT	FORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE	Director 2 1 Change	e	
NAME	BOYT, JAMES W.		1.2 NAME	James WilBOYT	sanit :	
STREET ADDRESS	2179 S. TAMIAMI TRAIL	i	1.3 STREET ADDRESS	2177 S. Tamiami Trail	ે 'ા' કે	
CITY-ST-ZIP	VENICE FL		1.4 CITY+ST-ZIP	Venice Fir 34393	8	
TITLE		☐ DELETE	2.1 TITLE	Secretary . DChange	e 🜠 Addition (
NAME			2.2 NAME	GAY I. BOUT		
STREET ADDRESS			2.3 STREET ADDRESS	2177 S. Tamiani Trail a	ベナリ	
CITY-ST-ZIP			2, 4 CITY-ST-ZIP	Venice 71. 34793		
TITLE	_	☐ DELETE	3.1 TITLE	Change	e 🔲 Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS		j	
CITY-ST-ZIP	·		3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE	☐ Change	e 🗀 Addition	
NAME			4. 2 NAME		İ	
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITUE	☐ Change	e 🖾 Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS	And the second secon		
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE	☐ Chang	e	
NAME			62 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, with all other like empowered.