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

**FILED** Jan 22 1998 8:00am PROFIT ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT # L41093 OGV PAINTING AND WATERPROOFING CONTRACTOR, INC.** Principal Place of Business Mailing Address 8030 BATES RD. 8030 BATES RD. ORLANDO FL 32807 ORLANDO FL 32807 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/03/1990 26. Mailing Address 26. 80.30 Bates Rd 2. Principal Place of Business 21 8030 BA LES Rd 4. FEI Number Applied For 59-2995384 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be Election Campaign Financing  $\mathcal{U}_{-}$ 23 OR 11260 belando Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 25 OT ANGL 29 3230 1 9. Name and Address of Current Registered Agent 32707 30 Brange ☐ No Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 81 DE PAZOS, ADRIANA **5448 HOFFNER AVENUE** 82 ORLANDO FL 32812 83 84 Zip Code 32807 ONDRLANDO 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-tramed 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 largitial with, and account the obligations of, Section 607.0505, Florida Statutes. SIGNATURE gistered agent and title it applicable (NOTF: Registered Agent signature required when reinstating) DATE CR2E034 (10/97) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition Change TITLE 1.1 1018 VALLADARES, OSUALDO GIL NAME 1.2 NAME 8030 BATED RD. STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32807 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2 2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TILE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP Change Addition TITLE □ DELETE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

678-0642-

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 frue 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 roceiver 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 atlachment with an address.

CITY-ST-ZIP

SIGNATURE: CEVALO Gil Valladares