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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # L74278

(7)

	DAINTINIO	CONTRACTING.	INC
STATEWILL	PAINTING	CUNTRACTING:	INC.

Principal Place of Business 876 N ATMORE CIR

1. Corporation Name

Mailing Address

876 N ATMORE CIR DELTONA FL 32725



	2125				3. Date Incorporated or Qualified	3a. Date of Las	st Report
					05/15/1990	06/19/	
		Ta Malan Addross			4. FEI Number		Applied For
Principal Place	of Business	2a. Mailing Address			59-3007226	<u> </u>	Not Applicable
Suite, Apt. #, 6	etc.	Suite, Apt. #, etc.	<u></u>		5. Certificate of Status Desired	7 -	.75 Additional ee Required
]		27					
City & State		City & State			6. Election Campaign Financing		5.00 May Be dded to Fees
į		28			Trust Fund Contribution		
Zip	Country	Z/p	Cod	itry	This corporation has liability for in Florida Statutes	∏ No	31 3 105.0021
25 29 30				10. Name and Address of New Registered Agent			
	9. Name and Address of Currer	nt Registered Agent		81 Name	10. Name and Address of New I	9.0.0	
				l I			
KONTOVA	AS, PETE K.			82 Street Addr	ess (P.O. Box Number is Not Acceptab	le)	
	IMORE CIR.						
	FL 32725			83			
				84 City		65	Zip Code
	the provisions of Sections 607,050				ration submits this statement for the pu	<u> </u>	1
familiar with.	, and accept the obligations of, sec	.tior) 607.0000, 110.100 d.c.	tutes.		ration stomits this statement to the pound of directors. Thereby accept the app	DATE	
S	grande typed a protection of registered app	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRE	CTORS IN 12
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confly that the information indicated on this annual report or supplemental annual report is true and accurate and that this signature shall have the same tight confly that the information indicated on this annual report or supplemental annual report is true and accurate and that this signature shall have the same tight conflicted on this annual report or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APR. 24/96 5320933.