## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

LOFT PAINTING & DECORATING, INC.

(4)

## **FILED** Sep 16 1997 8:00am Secretary of State



Principal Place of Business Mailing Address				<u>L</u>		1 IUDIIUSII BIO IBIIO FOLIO IVIIO IUIE		AHON DIBN DIB	A DIDIKADUK	
807 S. ORLANDO AVE.		807 S. ORLANDO AVE.								
STE, J. WINTER PARK FL 32789		STE. J WINTER PARK FL 32789				DO NOT WRITE IN THIS SPACE				
US		US				3. Date Incorporated or Qualified 3a. Date of Last Report				
						09/13/1990	02	/22/1996		
2. Principal Pla	ce of Business	26. Mailing Address				4, FEI Number		Ap	oplied For	
21		26	- <del> </del>			59-3034 <u>214</u>			ot Applicable	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A		
City & State		City & State	City & State			• Classica Occupation Classical			·	
23		28				6. Election Campaign Financing Trust Fund Contribution	$\Box$	\$5.00 Added t		
Zip	Country	Zip	Coun	try		8. This corporation owes or has	paid the cur			
24	25		30			Personal Property Tax due Jui			] No	
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New I	tegistered /	Agent		
	T, RHONDA G.		8	I1 Name		vid L. Loft Jr.				
807 S. ORLANDO AVE.				12 Street	Addres	ss (P.O. Box Number is Not Accept				
STE. J					80	7 S. Orlando Ave. S	uite J			
WINTER PARK FL 32789			[8	13					j	
			ε	14 City				85 Zip C 3278	Code	
44 Physical to	the provinces of Sections 607.05	02 and 607 1609. Elorida Statuta	o the abo	NO DOMOS		nter Park	FL			
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. I am familiar with a accept the appointment as registered agent. I am familiar with a accept the appointment as registered agent. I am familiar with a accept the appointment as registered agent. I am familiar with a accept the appointment as registered agent. I am familiar with a accept the appointment as registered agent. I am familiar with a accept the appointment as registered agent. I am familiar with a accept the appointment as registered agent. I am familiar with a accept the appointment as registered agent. I am familiar with a accept the appointment as registered agent. I am familiar with a accept the appointment as registered agent. I am familiar with a accept the appointment as registered agent. I am familiar with a accept the appointment as registered agent. I am familiar with a accept the appointment as registered agent. I am familiar with a accept the appointment as registered agent. I am familiar with a accept the appointment as registered agent. I am familiar with a accept the appointment as registered agent. I am familiar with a accept the appointment as registered agent. I am familiar with a accept the appointment as registered agent. I am familiar with a accept the										
SIGNATURE _	Ignature, typed or printed name of regulated .	pent and title if applicable (NOTE	eside Registered	<b>nt</b> Agent signatur	e required	when reinstating)	DATE	ber 9,	1997	
12.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF				
TITLE	VI	DELETE	1.1 TOTA	E	DPS			Change	Addition	
NAME	LOFT, CHERYL K		1.2 NAM			id L. Loft Jr.			[;	
STREET ADDRESS	807 S ORLANDO AVE., STE	. J	1.3 STR				Suite J		ļi	
CITY-ST-ZIP	WINTER PARK FL	The see		- ST- ZIP	W1n	<u>ter Park, Fla. 327</u>	89	По	<del></del> ;	
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14. I do 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 chapted, or on an attachment with an address.