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**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

03 OCT -3 PH 3: 03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00 0000 184 95

1. Entity Name

MANUEL PAINTING, INC



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1155 West 77 Street

Suite, Apt. #, etc.

213C

City & State

HIALEAH FL

3. Mailing Address

1155 West 77 Street

Suite, Apt. #, etc.

213C

City & State

HIALEAH FL

Zip

33014

Country

U.S.A.

Zip

33014

Country

U.S.A.

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0983603

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

MANUEL LINO GARCIA

Street Address (P.O. Box Number is Not Acceptable)

1155 West 77 Street apt 213C

City

HIALEAH

FL

Zip Code

33014

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9/25/2003

January - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
LINO GARCIA, MANUEL
7715 WEST 34th COURT
HIALEAH FL 33018

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
400023550934
10/03/03--01084--011 **150.00

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**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9/25/2003 (786) 426-0781

CR2E034B (12/02)

20f2

September 25, 2003

Division of Corporation
Uniform Business Report Filings

From: MANUEL PAINTING, INC.
P00000018495

Through this I want to notify that the papers for Uniform Business report
never been send to me.

I went to an Accounting Office and they let me Know the amount to be pay for the
company and also the reports.

I apology for the inconvenient then here I am sending my payments for the year of
2003.

Any question contact me (786) 426-0781

Sincerely,

Manuel Lino Garcia
President