

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

DOCUMENT # P 00000036977

1. Entity Name

PAINTING FOR LESS, INC.

DO NOT WRITE IN THIS SPACE

FILED

02 MAY 21 PM 2:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

579 W. FLAGLER STREET

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIAMI FLA

City & State

4. FEI Number

65-1021198

Applied For

Not Applicable

Zip

33130

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

ANDRES CAMERO

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

579 W FLAGLER STREET

City

MIAMI

FL

Zip Code

33130

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/D ANDRES CAMERO 18193 SW 28 STREET MIRAMAR FLA 33029	TITLE NAME STREET ADDRESS CITY - ST - ZIP	400005666084--4 -06/03/02--01091--010 ****150.00 ****150.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V/D JOSE MELO 579 W FLAGLER ST MIAMI FLA 33130	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S/D MIGUEL ROSELL 579 W FLAGLER ST MIAMI FLA 33130	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
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13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: *x Andres Camero*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/02

Date

Daytime Phone #