

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2004 8:00 am
Secretary of State

01-23-2004 90013 010 ***150.00

DOCUMENT # P00000059595



1. Entity Name
CONTINENTAL PAINTING, WATERPROOFING & RESTORATION, INC.

Principal Place of Business
**2950 N 28TH TERR
HOLLYWOOD, FL 33020**

Mailing Address
**2950 N 28TH TERR
HOLLYWOOD, FL 33020**

24003341



2. Principal Place of Business

3. Mailing Address

01122004 Chg-P CR2E034 (10/03)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
65-1019875

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KALLICHE, ANTHONY
C/O THE CONTINENTAL GROUP, LTD
2950 N. 28TH TERRACE
HOLLYWOOD, FL 33020**

Name

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

C/O The Continental Group, Inc

City

FL

Zip Code

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **PATTERSON, D. SCOTT**
CITY-ST-ZIP **FIRST SERVICE BLDG, 1140 BAY ST, STE 4000
TOTONTO, ONT M5S 2B4,**

TITLE ☐ Delete
NAME **DS**
STREET ADDRESS **STRUNIN, RICHARD**
CITY-ST-ZIP **2950 N 28TH TERR
HOLLYWOOD, FL 33020**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **GOMBERG, GENE**
CITY-ST-ZIP **2950 N 28TH TERR
HOLLYWOOD, FL 33020**

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **CHRISTENSEN, STEVEN J**
CITY-ST-ZIP **2950 N 28TH TERRACE
HOLLYWOOD, FL 33020**

TITLE ☐ Delete
NAME **P**
STREET ADDRESS **FAILLACE, PAUL V**
CITY-ST-ZIP **2950 N. 28TH TERRACE
HOLLYWOOD, FL 33020**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/04 (954) 925-8200
Date Daytime Phone #