

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 15, 2003 8:00 am
Secretary of State

09-15-2003 90161 038 ***550.00

DOCUMENT # P00000088907

1. Entity Name

KEITH'S PAPERHANGING AND PAINTING CO.



Principal Place of Business

5056 ASHLEY LAKE PARK
#5-28
BOYNTON BEACH FL 33437

Mailing Address

5056 ASHLEY LAKE PARK
#5-28
BOYNTON BEACH FL 33437

2. Principal Place of Business

5056 ASHLEY LAKE DR.
Suite, Apt. #, etc.
#5-28

3. Mailing Address

5056 ASHLEY LAKE DR.
Suite, Apt. #, etc.
#5-28

City & State

BOYNTON BEACH FL

City & State

BOYNTON BEACH FL

Zip

33437

Country

USA

Zip

33437

Country

USA

4. FEI Number

65-1028680

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

KANE, KEITH

5056 ASHLEY CT DR 528

BOYNTON BEACH FL 33437

7. Name and Address of New Registered Agent

Name

YOUNG, KEITH

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

5056 ASHLEY LAKE DR, #5-28

City

BOYNTON BEACH

FL

Zip Code

33437

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

Keith S. Young

PRESIDENT

9/9/03

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, 2003 Fee will be \$550.00

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 PSTD
NAME YOUNG, KEITH S
STREET ADDRESS 5056 ASHLEY LAKE PARK
CITY-ST-ZIP BOYNTON BEACH FL 33437

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
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CITY-ST-ZIP

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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:

Keith S. Young
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/9/03

561-752-9276

Date

Daytime Phone #

CR2E034 (10/02)