

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 07, 2003 8:00 am
Secretary of State

05-02-2003 90259 014 ***150.00

0066726 AV

DOCUMENT # P01000081104

1. Entity Name
PAINT & PAINT CORP.



Principal Place of Business
14901 SW 80 STREET
#221
MIAMI FL 33193

Mailing Address
14901 SW 80 STREET
#221
MIAMI FL 33193

55053572



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-1150361

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

7. Name and Address of New Registered Agent

RODOLFO, RODRIGUEZ R
11960 SW 188 TERR. 14901 SW 80 ST #221
MIAMI FL 33177 MIAMI FL 33193

Name

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

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 \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **RODOLFO, RODRIGUEZ R**
STREET ADDRESS **11960 SW 188 TERR.** 14901 SW 80 ST #221
CITY-ST-ZIP **MIAMI-FL 33177** MIAMI FL 33193

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

TITLE **T** ☐ Delete
NAME **RUTH, RODRIGUEZ**
STREET ADDRESS **11960 SW 188 TERR.** 14901 SW 80 ST #221
CITY-ST-ZIP **MIAMI FL 33177** MIAMI FL 33193

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

Attachment

UNIVERSITY OF CALIFORNIA, BERKELEY

5505 3572

#PD1000081104

8/4/03

Spoke to your office on 8/4/03.

Gentleman explained reason I received this second report was because needed to change address of officers ^{on the first report}. He said a letter was mailed to me.

In May I never received this letter you know how it is when you first change address. Please any questions call me 800-433-0757 x203

Thank you