FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 21, 2002 8:00 am Secretary of State

DOCUMENT # PO1000099427 1. Entity Name			05-21-2002 91189 012 ***150.00		
	V.J. V. Painting	Inc. \	V		
	DO NOT WRITE	IN THIS SI	PÂCE		
2. Principal (200 Suite, Apt	Place of Business D. R. Bowen Dr. . #, etc.	3. Mailing Address 2008 Bo Suite, Apt. #, etc.	wen Dr.	DO NOT WRITE IN TH	HIS SPACE
City & Sta	ando, FL	City & State Orlando	FL	4. FEI Number 593753238	Applied For Not Applicable
328	22 Country	32822	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	DO NOT-WI		Name VIC Street Address	7. Name and Address of Current Regist CHON VILLALO BOS (P.O. BOX Number is Not Acceptable) Alafaya Wood Blv	/d Apt B
SIGNATURE	e named entity submits this statement for Signature, typed or printed name of registered agent an	d title if applicable. (NOTE	registered office or registe		ΝΈ.
Tax filing	oration is eligible to satisfy its Intangible requirement and elects to do so. ria on back)	After May Amended Make Check Payab	ay 1 Fee is \$150.00 1, Fee is \$550.00 I UBR is \$61.25 le to Department of Sta	10. Election Campaign Financing Trust Fund Contribution,	\$5.00 May Be Added to Fees
Tax filing (See crite	requirement and elects to do so. ria on back) OFFICERS AND D	After May Amended Make Check Payab	1, Fee is \$550.00 I UBR is \$61.25 le to Department of Sta	Trust Fund Contribution.	Added to Fees
Tax filing (See crite	requirement and elects to do so.	After May Amended Make Check Payab IRECTORS	1, Fee is \$550.00 I UBR is \$61.25	Trust Fund Contribution.	Added to Fees
Tax filing (See crite 11. TITLE NAME STREET ADDRESS	requirement and elects to do so. ria on back) OFFICERS AND D Yresident Victor Villalobos 489 Alafaya Woods	After May Amended Make Check Payab IRECTORS	1, Fee is \$550.00 t UBR is \$61.25 le to Department of Sta	Trust Fund Contribution.	Added to Fees
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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:

Victor Villaloto - Prendent

4/29/02 407-832-9385