FILED Apr 28, 2003 8:00 am Secretary of State

04-28-2003 90507 032 ***150.00

•		WE TE	1				
Principal Place of Business 6772 SW 39 CT, DAVIE FL 33314	Mailing Address 6772 SW 39 CT. DAVIE FL 33314						
2. Principal Place of Business 14830 5w 20 th St Suite, Apt. #, etc. 3. Mailing Address 14830 Sw 20 th St Suite, Apt. #, etc.							
Suite, Apt. #, etc. Suite, Apt. #, etc.			CHECK HERE IF MAKING	CHANGES			
Davie, FL	FL Davie FL		4. FEI Number 470863767	Applied For Not Applicable			
Zip Country .33326	Zip Cour 33326	ntry	5 Certificate of Status Desired	\$8.75 Additional Fee Required			
6. Name and Address of C	Current Registered Agent	7. Name and Address of New Registered Agent					
Street A			Hermandez, Vincent Address (P.O. Box Number is Not Acceptable) 4830 Sw 20th Street				
DAVIE FL 33314		170.3	0 200 00 0 1120				
			ie, FL	Zip Code 33324			
The above named entity submits this state	ement for the purpose of changing its register	ed office or register	ed agent, or both, in the State of Florida. I am fa	emiliar with, and accept			

SIGNATURE Signature, typed or printed name of registered signature (NOTE: Registered Agent signature required when reinstating) DATE												
After	NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of State					on Campaign Financing und Contribution.		May Be to Fees				
10.	OFFICERS AND DIRECTORS		11.	ADE	DITIONS/CH	ANGES TO OFFICERS	AND DIRECTORS	S IN 11				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERNANDEZ, VINCENT 6772 SW 39 CT. DAVIE FL 33314	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	14830	o 5 ω	20ThSt 33326	↑ ☑ Change	☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERNANDEZ, YANET 6772 SW 39 CT. DAVIE FL 33314	☐ Celete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		5 SW	ez 20thst 33326	☐ Change	☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete -	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Fig. Stranger	. •		☐ Change	☐ Addition				
TITLE NAME STREET ADDRESS CITY-SI-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Celete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		· · ·		☐ Change	Addition				
TITLE		☐ Delete	TITLE		<u>.</u>		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.

STREET ADDRESS

CITY-ST-7IP

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT #

the obligations of registered agent.

VINCENT HERNANDEZ PAINTING, INC.

P02000044541

Date

Daytime Phone #