

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0001764 AV

DOCUMENT # P02000054235

1. Entity Name

MARTIN PAINTING & WALLCOVERING, INC.



**FILED**  
03 DEC 30 AM 9:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

118 FLORIDA PARK DR  
PALM COAST FL 32137

Mailing Address

118 FLORIDA PARK DR  
PALM COAST FL 32137

2. Principal Place of Business

118 FLORIDA PARK DRIVE  
Suite, Apt. #, etc.

3. Mailing Address

118 FLORIDA PARK DRIVE  
Suite, Apt. #, etc.

City & State

PALM COAST, FL  
Zip 32137 Country FLAGLER

City & State

PALM COAST, FL  
Zip 32137 Country FLAGLER

☐ CHECK HERE IF MAKING CHANGES

FILE NUMBER 37-1431041

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

FEINBERG, MARTIN N  
118 FLORIDA PARK DR  
PALM COAST FL 32137

7. Name and Address of New Registered Agent

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 *Martin N Feinberg*  
Signature, typed or printed name of registered agent and title if applicable.

MARTIN N FEINBERG

DATE 12/26/03

(NOTE: Registered Agent signature required when reinstating)

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  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME FEINBERG, MARTIN N  
STREET ADDRESS 118 FLORIDA PARK DR  
CITY-ST-ZIP PALM COAST FL 32137 ☐ Delete

TITLE STD  
NAME FEINBERG, LARISA  
STREET ADDRESS 118 FLORIDA PARK DR  
CITY-ST-ZIP PALM COAST FL 32137 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition  
500025857975  
12/30/03--01031--017 \*\*750.00

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

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

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

TITLE  
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: *Martin N Feinberg* MARTIN N FEINBERG 12/26/03 386  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 446-8449

CR2E034 (4/03)