FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

40200006011 **DOCUMENT #** 03 OCT 31 PM 4:22 DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State MAM Not Applicable \$8.75 Additional US A Fee Required 7. Name and Address of Current Registered Agent DO NOT WRITE IN THIS SPACE 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 registe SIGNATURE (NOTE: Registered Agent signature required when reinstating Sanuary 1 - May 1 Fee Is \$150.00 9. Election Campaign Financing After May 1, Fee is \$550.00 \$5.00 May Be Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State LOFFICERS AND DIRECTORS . 10. CR2E034B (12/02) TITLE TILE 800024341428 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CUY~SFAP N. MIAMI HILE NAME HANF STREET ADDRESS STREET ADDRESS CITY-S1-2IP CITY-ST-ZIP TITLE TITLE NAME NAME STHEET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP IN THIS SPACE 11111 TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAM: NAME STREET ADDRESS STREET ADDRESS CHY-ST-7IP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY/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 supplementaries 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 of tustee suppowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or on an attachment with an address, with a empowered. SIGNATURE: E AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

October 30, 2003

Department of State Division of Corporations Tallahassee, FL 32314

Subject:

Prime Colors Painting Corp.

Doc #:

P02000060117

## To Whom It May Concern:

This letter is in regards to the corporation annual report for the 2003 filing year. According to your records, you never received an annual report for our corporation. We are sending a filled out blank annual report to your Department because we never received the original report. The mailing address listed was incorrect. Please accept our apologies and accept this \$150.00 filing fee. We never meant to send the report late, if we would have received the report, we would have sent it on time. We apologize for any inconvenience this may have caused. If you have any questions please feel free to contact me at (305) 541-3980.

Sincerely,

Steven Shea resident