

2003 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2003 8:00 am
Secretary of State

05-12-2003 90203 004 ***150.00

DOCUMENT# P02000062310

1. Entity Name

EVEREST PAINTING CORPORATION

Principal Place of Business

Mailing Address

1021 NE 24TH AVENUE #6
POMPANO BEACH, FL 33062

1021 NE 24TH AVENUE #6
POMPANO BEACH, FL 33062

2. Principal Place of Business

7525 SW 6TH STREET

3. Mailing Address

7525 SW 6TH STREET

Suite Apt. #, etc.

Suite Apt. #, etc.

City & State

NORTH LAUDERDALE, FL

City & State

NORTH LAUDERDALE, FL

4. FEI Number

01-0704933

Applied For

Not Applicable

Zip

33068

Country

Zip

33068

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

TAX HOUSE CORPORATION
3929 N. FEDERAL HWY
POMPANO BEACH, FL 33064

7. Name and Address of New Registered Agent

Name

TAX HOUSE CORPORATION

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

531 E. SAMPLE ROAD

City

POMPANO BEACH

FL

Zip Code

33064

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

04/30/03

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW! FEE IS \$150.00

After MAY 1, 2003 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **ESCOBAR, FABIANO**
STREET ADDRESS **1021 NE 24TH AVENUE #6**
CITY-ST-ZIP **POMPANO BEACH, FL 33062**

TITLE **VD** ☐ Delete
NAME **DE OLIVEIRA, LUIZ**
STREET ADDRESS **1021 NE 24TH AVENUE #6**
CITY-ST-ZIP **POMPANO BEACH, FL 33062**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS /CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Change ☐ Addition
NAME **ESCOBAR, FABIANO**
STREET ADDRESS **7525 SW 6TH STREET**
CITY-ST-ZIP **NORTH LAUDERDALE, FL 33068**

TITLE **VD** ☒ Change ☐ Addition
NAME **DE OLIVEIRA, LUIZ**
STREET ADDRESS **7525 SW 6TH STREET**
CITY-ST-ZIP **NORTH LAUDERDALE, FL 33068**

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

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

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(1), 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 507, Florida Statutes, and that my name appears in Block 11 or Block 12 N changed or on an attachment with an address, with all other like empowered.

SIGNATURE:

Fabiano Escobar President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/30/03

Date

Daytime Phone #