

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-07-2004 90342 046 ***150.00

DOCUMENT # P02000074620

1. Entity Name
REVELATION PAINTING CORPORATION



Principal Place of Business
8851 NW 119TH ST #6208
HIALEAH GARDENS FL 33018

Mailing Address
8851 NW 119TH ST #6208
HIALEAH GARDENS FL 33018

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
City & State

Zip
Country



MOORE CR2E034 (11/03)

4. FEI Number 03-0470330 **Applied For**
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
REYES, ROMULO
8851 NW 119TH ST #6208
HIALEAH GARDENS FL 33018

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 _____ (NOTE: Registered Agent signature required when registering) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|--|---|---|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP REYES, ROMULO 8851 NW 119TH ST #6208 HIALEAH GARDENS FL 33018 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | RAMSES RODRIGUEZ 8851 NW 119TH ST #6208 HIALEAH GARDENS FL 33018 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DV EYES, EVA 8851 NW 119TH ST #6208 HIALEAH GARDENS FL 33018 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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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: Romulo Reyes *Romulo Reyes* **825-1232**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **(805) 825-1232**
Date **(786) 251-0239**