2004 FOR PROFIT CORPORATION ANNUAL REPORT

May 03, 2004 08:00 AM Secretary of State **DOCUMENT # P02000082841** J. FLORES PAINTING, INC. Principal Place of Business Mailing Address 8750 NW 32 COURT 8750 NW 32 COURT MIAMIL FL 33147 MIAMLEL 33147 Control of the second of the s 04272004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 04-3706893 Not Applicable \$8.75 Additional 5. CertTicate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FLORES, SANTOS J DO NOT WRITE 8750 NW 32 COURT MIAMI, FL 33147 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 registered agent. SIGNATURE c. Tacker printed name of registered agent and the 4 apparation CADITE. Registered Agent signal or inquired when rear tall ag 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be U00000153545 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS DILE FLORES, SANTOS J 1-ALA STREET ADDRESS 8750 NW 32 COURT MIAMI, FL 33147 CITY-ST ZIP HRE KALVE STREET ADERESS - more more more alternal of an application of the control of the CITY -ST-ZIP and the second of the second o 100 F NAME STREET ADDRESS DO NOT WRITE CITY ST ZIP IN THIS SPACE **កភា** F WALK STREET ADDRESS C074-ST-782 HILE 1,13,5 STREET ADDRESS CITY ST ZIP minima, deplacementa de decembratica de la proposición de la proposición de la proposición de la proposición d TITLE The many the state of the state KAME STREET ADDRESS CITY - ST - ZIP 12. I hereby certly that the information supported with this filing does not quality for the exemption stated in Section 119.07(3)(). For da Statutes, I turther 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 tustee 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.

ENHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:)

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