1 as

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

1. Entity Name	OCUMENT # P02000126491 tity Name : A MASTER PAINTING, INC.			O4 MAY -4 AM 9:57 SECRETARY OF STATE	
Ď	O NOT WRITE	IN THIS SP	ACE	TALLAHASSEE, FLORIDA	
2. Principal Place 3050 Turtled Suite, Apt. #, e	dove Terrace	3. Mailing Address same Suite, Apt. #, etc.	<u> </u>	HEINSTATEMENT 03-04	
City & State Deland, Flor	rida	City & State	*	4. FEI Number Applied For Not Applicable	
Zip 32724	Country United States	Zip	Country	5. Certificate of Status Desired	
	DO NOT W IN THIS SP	A D. M. ALIMINE IN THE CO.	Street Ac	7. Name and Address of Current Registered Agent Spiegel & Utrera, P.A. Idress (P.O. Box Number is Not Acceptable) Coral Way, 4th Floor	
				ami, FL Zin Code 33145	
8. The above named entity submits his 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. Spiegel & Utrera, P.A. Signature: Speed or season to be of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE					
January 1 - May 1 Fee is \$150.00 After May 1; Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State					
STREET ADDRESS K	STD evin J. Vara 050 Turtledove Terrace, E	***	NAME STREET ADDRESS CITY-ST-ZIP	300036191753 05/12/04-01030-00*** 400-05/12/04-01030	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	US/12/U401U30004 **300.00 8	
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NAME STREET ADDRESS CITY - S1 - ZIP	í		NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE	
NAME STREET ADDRESS CITY-S1-ZIP			NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-SI-ZIP		7	NAME STREET ADDRESS CITY-ST-ZIP	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information two 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 on an attachment with an address, with all other like empowered.					
SIGNATURE: Kevin J. Vara SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Darling Phone -					

727

AFFIDAVIT IN SUPPORT OF REQUEST TO WAIVE THE FLORIDA DEPARTMENT OF STATE CORPORATE REINSTATEMENT FEES

STATE OF FLORIDA)
COUNTY OF Solvia	_)

- 1. Kevin J. Vara is the President of AAA MASTER PAINTING, INC., a Florida corporation, (hereinafter "Corporation").
- 72. That the Corporation was administratively dissolved by the Florida Department of State on 19 September 2003.
 - 3. That the Corporation failed to file its 2003, 2004 Annual Report or pay the 2003, 2004 Annual Report filing fee within the time prescribed by Florida Statutes Chapter 607 because:
 - the written notice and requirements for filing the Annual Report and pay the Annual Report fee to the Florida Department of State was never received by the Corporation; and,
 - the written notice was never received by the Corporation or its Registered Agent that the Florida Department of State was commencing a procedure to administratively dissolve the Corporation.
 - 4. The Corporation requests the Florida Department of State reinstate the Corporation upon the payment by the Corporation of its 2003, 2004 Annual Report fees and the filing of its 2003, 2004 Annual Reports, which are presented simultaneously with this Affidavit.
- 5. AAA MASTER PAINTING, INC. satisfies the requirements of the Florida Statutes 607.0401.
- 6. No further ground or grounds exist for the administrative dissolution of the Corporation.

Dated: May of April , 2004

FURTHER, AFFIANT SAYETH NOT

AAA MASTER PAINTING, INC.

Kevin J. Vara, President

SWORN AND SUBSCRIBED

before me this 27 day of Opil, 200

DEBRA A LOCKINGBILL
Commit D00277536
Expires 8/6/2007
Bonded thre (800)432-4254
Florida Notary Assn., Inc.

Notary Public, State of Florida at Large
Printed Name: Debra A. LOOKingbill
Commission Expires: 8/5/2007