2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Jul 28, 2004 8:00 am Secrétary of State DOCUMENT # P03000097736 1. Entity Name 07-28-2004 90016 027 ***150.00 BETHEL PAINTING, INC. Principal Place of Business .. Mailing Address 1290 SW 28 AVENUE 1290 SW 28 AVENUE FT LAUDERDALE FL 33312 FT LAUDERDALE FL 33312 2. Principal Place of Business 3. Mailing Address 28 A 1290 SW 1290 Suite, Apt. #, etc. Suite, Apt. #, etc CR2E034 (4/04) Applied For City & State 4. FEI Number 20-02178 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MAZARIEGOS; JOSE -Street Address (P.O. Box Number is Not Acceptable) 1290 SW 28 AVENUE FT LAUDERDALE FL 33312 Zip Code 8. The above named entiosubmits 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. FILE NOW!!! FEE IS \$550.00 \$.607.193(2)(b), F.S., allows for the waiver of the \$400.00 9. Election Campaign Financing \$5.00 May Be DUE BY September 8, 2004 late fee. By checking this box, the corporation certifies_it Trust Fund Contribution. Added to Fees did not receive prior notice. Fee to file is \$150.00. Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. Addition TITLE ☐ Delete MAZARIEGOS, JOSE NAME NAME STREET ADDRESS 1290 SW 28 AVENUE STREET ADDRESS FT LAUDERDALE FL 33312 CITY-ST-7IP CITY-ST-ZIP VΡ TITLE ☐ Delete TITLE ☐ Change Addition MAZARIEGOS, ARMANDO NAME MAME STREET ADORESS 1290 SW 28 AVENUE STREET ADDRESS FT LAUDERDALE FL 33312 CITY-ST-ZIP CITY-ST-ZIP Change TIT! F Delete TITLE ☐ Addition NAME NAME MAZARIEGOS, PEDRO STREET ADDRESS 1290 SW 28 AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33312 ☐ Addition ☐ Delete STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITI E ☐ Change ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-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 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 withyan address, with all other like empowered.

FILED

7-24-04
Daylune Phone #

Affordmans # PSD000 97 BL 7/24/04 54065774

To: Division of Corporation Annual Report Section P.O. Box 6850 Tallahassee, Fl. 32314

I'm sending the amount of \$150.00 dollars to pay for Annual Report 2004. Please I want to waive the \$400.00 late fee, because I filled a form that you send, asking you to send me the annual report this way (by mail) and this is the first time I recieved. I'm expecting you to accept my payment.

Thank You, Jose Mazariegos Bethel Painting Inc.