## **2004 FOR PROFIT CORPORATION** ANNUAL REPORT DOCUMENT # P03000124599 1. Entity Name RICHARD ALAN PAINTING AND WALLPAPER

## **FILED** Jan 30, 2004 8:00 am Secretary of State 01-30-2004 90072 013 \*\*\*150.00

CORPORATION				<i>y</i>	
3501 S ATLANTIC AVE UNIT 403		Mailing Address P.O.BOX 265723 DAYTONA BCH, FL 3212	26		
2. Principal Place of Business		3. Mailing Address .			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01272004 Chg-P	CR2E034 (10/03)
City & State		City & State		4. FEI Number 20 - 0545 35	Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Reg	istered Agent
				the state of the s	
HYDE, RÎCHARD A 3501 S ATLANTIC AVE UNIT 403 DAYTONA BCH SHORES, FL 32118			Street Address	s (P.O. Box Number is Not Acceptable)	
					, <u> </u>
	,		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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE					
				5.00 May Be	
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 11
NAME - STREET ADDRESS CITY-ST-ZIP		☐ Delete	STREET ADDRESS 35	MARI ALAN MYPE OI S. ATLANTIC AVE, U	
	<del></del>		TITLE	YONA BEACH SHORES,	☐ Change ☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP		Change Adumbin
TITLE NAME		☐ Delete	TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
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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 empswered 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: SIGNATURE AND TYPED OR PRINTED PANE OF SIGNING OFFICER OR DIRECTOR

1/27/04

386-235-1412 Daytime Phone #