FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortnam Secretary of State DIVISION OF CORPORATIONS

1996 **DOCUMENT #**

P93000004956 (7)

PERFECTION PAINTING & CLEANING INC.

Principal Place of Business Mailing Address					ist maste aneit mitte beiten sitter berten fielt effet
302 STENDAL RD. N.W. Palm Bay Fl 32907		302 STENDAL RD. Palm bay FL 329			
				 Date incorporated or Qualified 01/22/1993 	3a. Date of Last Report 05/31/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3161554	Not Applicable
Suite, Apt. #, etc		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28	Country	Trust Fund Contribution 8. This corporation has liability for in	Added to Fees
24	25	29	30	Florida Statutes Yes	
	9. Name and Address of Curre	4 4		10. Name and Address of New R	egistered Agent
WOOD, LISA A 302 STENDAL RD., N.W. PALM BAY FL 32907 81 Name Terence V. Wood 82 Street Address (P. J. Box Number is Not Acceptable) 303 STENDAL RD., N.W. 83 Street Address (P. J. Box Number is Not Acceptable) 84 City Palm Bay FL 85 39907					
11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE					
12.	Signature, typed or printed name of registered age. OFFICE DC: AA	it and little if as contable	NC/TE. Registered Agent signature nequi 13.		CERC AND EVER CROSS IN TO
TITLE	VP CONSTRU	DELETE		additions/changes to offi tesicent, V.P., Treasur	Change Addition
NAME	WOOD, TERENCE V		12 11145	acence if hinde	_
STREET ADDRESS	302 STENDAL RD., NW		13 STREET ADDRESS	302 Stendal Rd. N	ω
CITY-ST-ZIP	PALM BAY FL		1.4 City - ST - ZIP	Palm Bay, FL 320	107
TITLE	Р	DELETE	2 ' NILE		Change Addition
NAME	WOOD, LISA A	•	2.2 NAME		<i>F</i> –
STREET ADDRESS	302 STENDAL RD., NW		2.3 STHEFT ADDRESS	7 1 1	·
CITY-ST-7/P	PALM BAY FL		2.4 CI*Y - S* - ZIP	Delete	<u> </u>
TITLE		☐ DELETE	3 1 TITLE		Change 🗀 Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-SI-ZIP		——————————————————————————————————————	3.4 City - St - ZIP		
TITLE		☐ DELETÉ	4 1 TITLE		Change Addition
NAME OTOGET A DODGEGE			4.2 NAME		
STREFT ADDRESS			4 3 STRÉET ADDRESS		
CITY-S1-ZIP		DELETE	4.4 CITY - ST - ZIP		Change D Addition
TITLE NAME		C) Detter	5 1 TITLE 5 2 NAME		Change Addition
STREET ADDRESS			5.2 NAME 5.3 STHEEF ADDRESS		
CITY-S1-ZIP			5 4 CITY - ST - ZIP		
TITLE		DELETE	6 1 THE		Crange Addition
NAME			62 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY - ST - ZIP			6 4 City - St - ZiP		
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes 1 further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal 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 12 or Block 13 if changed, or on an attachment with an address.					

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TERENCE V. WOOD 407-128-2297

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