FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P93000040561 (1)**

1. Corporation Name
SUNSHINE PAINTING CORP., INC.

Principal Place of Business
4845 NW 191ST ST
MIAMI FL 33055

Mailing Address
4845 NW 191ST ST
MIAMI FL 33055

3. Date Incorporated or Qualified: **06/08/1993**
3a. Date of Last Report: **05/16/1995**

4. FEI Number: **65-0426818** — Applied For / Not Applicable

5. Certificate of Status Desired: ☑ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21 | 22 State, Apt. #, etc. | 23 City, & State | 24 Zip | 25 County

2a. Mailing Address
26 | 27 Street, Apt. #, etc. | 28 City, & State | 29 Zip | 30 Country

9. **Name and Address of Current Registered Agent**

MAURY, MANUEL J
4845 NW 191ST ST
MIAMI FL 33055

10. **Name and Address of New Registered Agent**
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0505 and 607.0506, 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. I hereby accept the appointment as registered agent. I am familiar with, and I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE — DATE

12. OFFICERS AND DIRECTORS

DPS
MAURY, MANUEL J
% 4845 NW 191ST ST
MIAMI FL 33055
☐ DELETE

DVT
MAURY, ENRIQUE
% 4845 NW 191ST ST
MIAMI FL 33055
☐ DELETE

☐ DELETE
☐ DELETE
☐ DELETE
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE — ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY, ST, ZIP
21 TITLE — ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY, ST, ZIP
31 TITLE — ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY, ST, ZIP
41 TITLE — ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY, ST, ZIP
51 TITLE — ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY, ST, ZIP
61 TITLE — ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY, ST, ZIP

14. I hereby certify that the information supplied with this report, voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I 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 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 12 or Block 13 (if changed, or organized) herein with an asterisk.

SIGNATURE Enrique Maury V.P. — 2-4-96 — (305)-621-4988
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE #
Enrique Maury

CR2E034 (12/95)