

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 # P93000043384 (5)

1. Corporation Name

THOMAS AND AHL PAINTING AND DESIGN INC.



Principal Place of Business

2822 S.W. 4TH STREET
BOYNTON BEACH FL 33435

Mailing Address

2822 S.W. 4TH STREET
BOYNTON BEACH FL 33435

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

06/14/1993

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0420343

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

9. Name and Address of Current Registered Agent

AHL, ROBIN T
2822 S.W. 4TH STREET
BOYNTON BEACH FL 33435

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 607.0502 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and, if not applicable,

(P001) Registered Agent signature required when resigning

DATE

12. OFFICERS AND DIRECTORS

☒ DELETE

TITLE
NAME V NEUMANN, ROBERT
STREET ADDRESS 2801 SAVANNA RD
CITY-ST-ZIP JENSEN BEACH FL

☐ DELETE

TITLE
NAME DPTS AHL, JEFFREY D
STREET ADDRESS 2822 S.W. 4TH STREET
CITY-ST-ZIP BOYNTON BEACH FL

☒ DELETE

TITLE
NAME V BOGGS, RANSFORD TODD
STREET ADDRESS 22159 PALMS WAY
CITY-ST-ZIP BOCA RATON FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☒ Addition

11 TITLE TS
12 NAME AHL, ROBIN THOMAS
13 STREET ADDRESS 2822 SW 4 STREET
14 CITY-ST-ZIP BOYNTON BEACH, FL 33435

☒ Change ☐ Addition

21 TITLE DP
22 NAME AHL, JEFFREY D
23 STREET ADDRESS 2822 SW 4 STREET
24 CITY-ST-ZIP BOYNTON BEACH, FL 33435

☐ Change ☒ Addition

31 TITLE V
32 NAME AHL, RYAN D
33 STREET ADDRESS 1985 E 22 COURT
34 CITY-ST-ZIP BOYNTON BEACH, FL 33435

☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 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. 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 on an attachment with an address

SIGNATURE:

ROBIN THOMAS AHL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-96

4-07-364-3505

(Date)

(Daytime Phone)

CR2E034 (12/95)