FILE NOW: FILING FEE AFTER MAY 1 IS \$550

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT

STATE Sandra B. Mort

FILED

Apr 14 1997 8:00am

Secretary of State

Secretary of Sta DIVISION OF CORPOR IONS

1997

CITY-ST-ZIP

DOCUMENT # P93000043384

THOMAS AND AHL PAINTING AND DESIGN INC.

Principal Place of Business Mailing Address 2822 S.W. 4TH STREET 2922 S.W. 4TH STREE BOYNTON BEACH FL 33435 BOYNTON BEACH FL					35-7902							
							3. Date Incorpora 06/14/1993	ted or Qualified		of Last R	eport	
	Place of Busi	ness	2a. Mai	ling Address	·	4, FEI Number			Ar	plied For		
21			26				65-042034	3			it Applicable	
Sulte, Apt	. #, 0 10.			Suite, Apt. #, etc.			5. Certificate of St	atus Desired		\$8.75 / Fee Re		
City & Sta	te		27 City	City & State			6. Election Campa	Jan Financian		\$5.00		
23			·	28			Trust Fund Con			Added t		
Zip		Country	Zip		Countr	у	8. This corporation		intangible ta			
24		25	29		30		Florida Statutes		Yes 🔲	No		
		and Address of Curr	ent Registered	f Agent			10. Name and Add	Iress of New Re	gistered Ag	ent		
	L, ROBIN T				81	Name	2	,				
2822 S.W. 4TH STREET					82	Street	Address (P.O. Box Number	ress (P.O. Box Number is Not Acceptable)				
BO	ANTON BE	ACH FL 33435			83							
					["	Ί						
					84	City			FL	85 Zip (Code	
agent. I a	to the provis registered ag am familiar w	ions of Sections 607.00 gent, or both, in the Sta lith, and accept the obt	502 and 607,15 te of Florida. So igations of, Sec	08, Florida Statute uch change was a stion 607.0505, Flo	es, the above uthorized b rida Statuto	ve-named by the col	d corporation submits this st poration's board of director	atement for the p s. I hereby accep		nanging its	s registered registered	
SIGNATURE	Signature, lyped	or printed name of registered a	igent and title if appl	cable (NOTE	: Registered Aç	ora signatu	re required when reinstating)		DATE			
12.	1 2 2	OFFICERS A	ND DIRECTOR		13.		ADDITIONS/CHA	NGES TO OFFIC	ERS AND D	IRECTOR		
TITLE	TS	AND STALLA		☐ DELETE	1.1 TITLE		TS		ух	Change	Addition	
NAME		BIN THOMAS			1.2 NAME		AHL, ROBIN THO 2822 SW 4 ST	MAS				
STREET ADDRESS		V 4TH STREET				i address	2822 5 W 4 57	REET				
CITY-ST-ZIP	DP	N BEACH FL		DELETE	1.4 CiTY	S1-ZIP	BOYNTON BOAK	H FL		Change	Addition	
TITLE NAME	AHL, JEI	בכסבע ה		בן מננונ	2.1 TITLE 2.2 NAME) Change	L] AUGILION	
STREET ADDRESS		V. 4TH STREET				i address						
CITY-ST-ZIP		N BEACH FL			2 4 DITY-							
TITLE	V	T DO TOTT L		DELETE	3.1 TITLE	31-Zir				Change	Addition	
NAME	AHL, BR	YAN D.			3.2 NAME				_			
STREET ADDRESS		27 COURT			1	T ADDRESS						
CITY-ST-ZIP		N BEACH FL			3.4, CITY-	ST-ZIP						
TITLE	1			DELETE	4.1 TITLE					Change	Addition	
NAME					4 2 NAME						ĺ	
STREET ADDRESS	1				4.3 STREE	I ADDRESS						
CITY-ST-ZIP					4.4 CITY -	ST-ZIP	<u> </u>			T		
TITLE	[DELETE	5.1 TITLE		1		L] Change	Addition	
NAME					5.2 NAME							
STREET ADDRESS	i				1	I ADDRESS	Į.					
CITY-ST-ZIP	 			Louisi	5.4 C(1Y-	ST-ZIP	ļ			1 050	T Addition	
TITLE				DETEJE	6.1 TITLE				<u> </u>	Change	Addition	
NAME OTOTET ADDRESS	}				62 NAME	T ADDRESS	}					
STREET ADDRESS	1				E GREEF	LADDRESS	1					

6.4 CITY-S1-ZIP 14. I do 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 annual report or supplemental annual report is true and alcurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to elecute 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.