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May 05 1997 8:00am
Secretary of State

PROFIT-
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P93000059275 (6)

1. Corporation Name
BOB'S CUSTOM PAINTING INC.

Principal Place of Business

12 WINDOVER PLACE
PALM COAST FL 32137

Mailing Address

12 WINDOVER PLACE
PALM COAST FL 32164-7610



3. Date Incorporated or Qualified

08/19/1993

3a. Date of Last Report

05/01/1996

4. FEI Number

59-3198583

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 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

JOSEPH, WALTER J
12 WINDOVER PLACE
PALM COAST FL 32137

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 title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME JOSEPH, WALTER J.
STREET ADDRESS 12 WINDOVER PL
CITY-ST-ZIP PALM COAST FL

☐ DELETE

TITLE ST
NAME JOSEPH, RENIAT K.
STREET ADDRESS 12 WINDOVER PL
CITY-ST-ZIP PALM COAST FL

☐ DELETE

TITLE V
NAME JOSEPH, DWAYNE J.
STREET ADDRESS 12 WINDOVER PL
CITY-ST-ZIP PALM COAST 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

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption indicated on this annual report or supplemental annual report is true and accurate. I am an officer or director of the corporation, the registered or trustee empowered to exercise the powers of the corporation, or an attachment with an address, as required by Chapter 607, Florida Statutes; and that my name is listed in Section 119.07(3)(i), Florida Statutes. I further certify that the signature of the registered agent shall have the same legal effect as if made under oath; that the signature of the corporation shall have the same legal effect as if made under oath; and that my name is listed in Section 119.07(3)(i), Florida Statutes; and that my name is listed in Section 119.07(3)(i), Florida Statutes.

SIGNATURE:

Walter J. Joseph

4/25/97 1904-445-2131

CR2E034 (9/96)