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PROFIT CORPORATION ANNUAL REPORT



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

1996

P94000008726 (9)

| 1. Corporation Name LYLE PAINTING CORPORATION Principal Place of Business Address 2631 NW 4TH STREET FT. LAUDERDALE FL 33311 FT. LAUDERDALE FL 33311 | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|------------|--------------------------|---------------|--|
| | | | | | | | 02 | Incorporated or Qua /03/1994 | alified 3 | 3a. Date of La 02/03/ | st Re 199 | port 5 |
| Principal Pla | ice of Business | | 2a. Mailing Address | | | | 4. FÉIT | lumber 5-0461138 | | | | pplied For ot Applicable |
| Suite, Apt. # | ŧ, etc. | | Suite, Apt. #, etc |). | | | | ficate of Status Desi | red [| | .75 | Additional |
| <u> </u> | | | 27 | | | | C 51000 | in Campaign Finan | | | | equired |
| City & State | ı | | City & State | | | | I | ion Campaign Finan Fund Contribution | cing [| | | May Be to Fees |
| Zip | [C | ountry | Zip | Co | untry | | ı. | corporation has liabi | | | er s | 199.032, |
| <u> </u> | 25 | | 29 | 30 | · · · · · · · | | | | Yes [| | | |
| | 9. Name and A | ddress of Current | Registered Agent | | 81 | Name | 10. Nan | e and Address of | New Heg | istered Ageni | | |
| IVIEN | LDOCKI D | | | | 1 1 | | | | | · | | |
| LYLE, DARREN D 2631 NW 4TH STREET | | | | 82 | Street Ac | kdress (P.O. B | ess (P.O. Box Number is Not Acceptable) | | | | | |
| | UDERDALE FL | 33311 | | | 83 | | | | | | | |
| | | | | | 84 (| City | | | | 85 | Žip | Code |
| | | | | | 1 1 | • | | | 21 | FL 👸 | <u> </u> | -1-1 |
| Pursuant t or registers familiar wit | o the provisions of ed agent, or both, i th, and accept the | Sections 607.0502 a n the State of Florida obligations of, Section | and 607.1508, Florida St Such change was auth n 607.0505, Florida Stat | tatutes, the ab horized by the tutes. | ove-nar corpora | med corp ation's b | oration submi pard of directo | is this statement for rs. I hereby accept t | he appoint | tment as regist | ered | agent. I am |
| or registere familiar wit | ed agent, or both, i in, and accept the | Sections 607.0502 a n the State of Florida obligations of, Section of name of registered agent an OFFICERS AND | i. Such change was auth n 607.0505, Florida Stat ad title if applicable | horized by the tutes. | corpora d Agent s | ation's D | pard of directo | rs. I nereby accept to | ne appoini | DATE ERS AND DIRE | CTO | RS IN 12 |
| or register familiar wit GNATURE _ 2. | ed agent, or both, in, and accept the inserting speaking | n the State of Florida obligations of, Section of name of registered agent are OFFICERS AND | i. Such change was auth n 607.0505, Florida Stat ad title if applicable | (NOTE: Registere | d Agent s | ation's D | pard of directo | rs. I nereby accept to | ne appoini | DATE | CTO | RS IN 12 |
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SIGNATURE: SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT

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954 533 1890 Daytinie Phone #

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