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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

P94000026092 (4)

DOCUMENT #
1. Corporation Name PARADISE PAINTING & DECORATING CO., INC.

Principal Place of Business

Mailing Address



| County State 28 N ag 1 29 | 1960 RIVER NAPLES FL | REACH DR #189 33942 | 1960 RIVER REACH DR NAPLES FL 33942 | #189 | | |
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| Solito, Act. 4, etc. Solito, April 4, etc. Solito | — | o' 0 | 221/ // | P. 1. 6 4 | . OP 0404000 | |
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| SS. 00 May Be Country Country SS. 00 May Be Country SS. 00 | 22 كير | 17. 17. | 27 Suite #4 | 15 | 5. Certificate of Status Desired | 1 1 |
| BOMBARD, CINZIA 1980 RVF REACH DR #189 NAPLES FL 33942 SIGNATURE State of Florids | 23 Na | 1125 PL | 28 Naples, | FL | Trust Fund Contribution | Added to Fees |
| BOMBARD, CINZIA 1960 RIVER REACH DR #189 NAPLES FL 33942 11. Fururant to the provisions of Socions 607 0502 and 607 1508, Fords Statutes, the above named corporation submits this statement for the purpose of changing its registered difficult or registered agent or both in the State of Rouse, Sport Registered Statutes, the above named corporation submits this statement for the purpose of changing its registered difficult or registered agent or both in the State of Rouse, Sport Registered Statutes, the above named corporation submits this statement for the purpose of changing its registered difficult for registered agent or both in the State of Rouse, Sport Registered Statutes, the above named corporation submits this statement for the purpose of changing its registered difficult for registered agent. I am statement of the purpose of changing its registered difficult for registered agent. I am statement for the purpose of changing its registered difficult for registered agent. I am statement for the purpose of changing its registered difficult for registered agent. I am statement for the purpose of changing its registered difficult for registered agent. I am statement for the purpose of changing its registered difficult for registered agent. I am statement for the purpose of changing its registered difficult for registered agent. I am statement for the purpose of changing its registered difficult for registered agent. I am statement for the purpose of changing its registered difficult for registered agent. I am statement for the purpose of changing its registered difficult for registered agent. I am statement for the purpose of changing its registered difficult for registered agent. I am statement for the purpose of changing its registered agent. I am statement for the purpose of changing its registered agent. I am statement for the purpose of changing its registered agent. I am statement for the purpose of changing its registered agent. I am statement for the purpose of changing its registered agent. I am state | 24 339 Y | 2 25 Collick | 29 33942 | | This corporation has liability for it Florida Statutes | |
| NAPLES FL 33942 11. Pursuant to the provisions of Sections 607 (500, Earl 607) 1500, Florids Statutes, the above named corporation submits this statement for the purpose of changing its registered office formism with, apil accept the obligations of Section 637 (500, Florids Statutes, the above named corporation submits this statement for the purpose of changing its registered office formism with, apil accept the obligations of Section 637 (500, Florids Statutes) SIGNATURE SIGNATURE | | 9. Name and Address of Current | Registered Agent | | 10. Name and Address of New R | egistered Agent |
| SIGNATURE CONTROL TO THE Obligations of, Section 607 0505, Fierds Statutes. SIGNATURE CONTROL THE Obligations of, Section 607 0505, Fierds Statutes. SIGNATURE CONTROL THE Obligations of the Control o | 1960 RIV NAPLES | /ER REACH DR #189 FL 33942 | and £07.1508, Florida Statules, | 83 760 84 City | APLES | FL 85 Zip Code 33 9 1/2 |
| 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE BOMBARD, CINZIA 1960 RIVER REACH DR #189 NAPLES FL 33942 12 NAME 13 SIRRET ADDRESS NAPLES FL 33942 14 CITY-ST-ZIP CAPONE, ANTONIO 20 STREET ADDRESS NAPLES FL 33942 14 CITY-ST-ZIP CAPONE, ANTONIO 20 STREET ADDRESS NAPLES FL 33942 15 ITILE 27 NAME 28 STREET ADDRESS NAPLES FL 33942 16 Change Addition ADGRESS CITY-ST-ZIP DELETE DELETE 31 TITLE V/ 32 NAME 33 STREET ADDRESS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 C/N Z I A BOM BARO I CAPONAL A LANK NAPLES, FL 33,942 Change Addition ADGRESS CITY-ST-ZIP DELETE DELETE DELETE DELETE DELETE DELETE DELETE DELETE DELETE 1 TITLE DAY IO CAPONAL ASSIRET ADDRESS ACTIV-ST-ZIP ACTIV-ST-ZIP AND CAPONAL ASSIRET ADDRESS ACTIV-ST-ZIP AND CAPONAL ASSIRET ADDRESS ACTIV-ST-ZIP ASSIRET ADDRESS ACTIV-ST-ZIP DELETE DELETE DELETE DELETE DELETE DELETE 1 TITLE Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 C/N Z IA BOM BARO I CAR OF NIA IA NIA NAPLES, FL 33,942 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CAR OFFICERS AND DIRECTORS TO ADDRESS ACTIV-ST-ZIP ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TO ADDRESS ADDITIONS/CHANGE TO ADDRESS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS ADDRESS ADDITIONS/CHANGES TO OFFICERS ADDRESS ADDITIONS/CHANGES TO OFFICERS ADDRESS ADDITIONS/CHANGE TO ADDRESS ADDITIONS/CHANGES TO OFFICERS ADDRESS ADDITIONS/CHANGES TO OFFICERS ADDRESS ADDITIONS/CHANGES TO ADDRESS ADDITIONS/CHANGES A | familiar with | h, applaccept the obligations of, Section Contract Contract | n 607.0505, Florida Statutes. | by the corporation's | board of directors. Thereby accept the appo | intment as registered agent. I am 4/22/90 |
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| 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 in two and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further | | | | 64 CITY ST. 2IP | | |

certing 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.

CINZIA BOMBARO - PRO 4/22/96