FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90183 024 ***150.00

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DOCUMENT # P9400046839

Corporation Name

INDUSTRIAL MIL-SPEC PAINTING, INC.

Principal Place of Business Mailing Address							11) Ba isi ar iii b i	#4E #11#1	10100 (11	10 1911 1001	
6503 19TH ST E 6503 19TH ST B-2						1					
SARASOTA FL		SARASOTA FL 34243				DO NOT WRITE IN THIS SPACE					
		us					IE IN THIS	SPACE			į
						3. Date Incorporated or Qualifed					
6 55 150	(Durling)	2 Mailing Address				06/13/1994 4. FEI Number			Appli	ed For	l
<u> </u>	ace of Business	2a. Mailing Address			1		Applied For Not Applicable		ł		
21 Suite Ant	# ata	Suite Ant # etc	Suite, Apt. #, etc.			65-0498150		\$8.7		ditional	l
Suite, Apt. #, etc.		 				5. Certifcate of Status Desired			e Regu		
22 City & State		27 City & State	City & State			6. Election Campaign Financing			חח יי	av Pa	=
23		28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip	Country	Zíp				8. This corporation owes the current year Intangible					
24	25	29	30			Personal Property Tax.					
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent					
,				81	Name						ĺ
FRENCH, DONNA J				82	Street Addre	ess (P.O. Box Number is Not Accepta	able)				l
6503		OZ Sileet Addit			(i					l	
SAR	ASOTA FL 34243			83						_	
				84	City			85 2	Zip Co	de	
					•		FL		•		
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statu	tes, the a	evod	named corpo	pration submits this statement for the	purpose of o	hanging	g its re	gistered stered	l
agent. I a	m familiar with, and accept the obligati	ions of, Section 607.0505, Flo	rida Stat	utes.	no corporation	in a board of directions. Thereby decap	or and opposit				
SIGNATURE											ĺ
Signature, typed or printed name of registered agent and title if applicable. (NOTE: R					signature required		DATE	O DIDE	CTOB	C IN 12	ĺ
12.			13.	T -		ADDITIONS/CHANGES TO OF	FICERS AN	Char		Addition	l
πιε	PTS		1						.90		l
NAME	FRENCH, DONNA J		12 N								l
STREET ADDRESS	6503 19TH ST E B-2			1.3 STREET ADDRESS							
CITY-ST-ZIP	SARASOTA FL VQSC	DELETE	1.4 U		-ZIP			☐ Char	nge	Addition	ĺ
TITLE	SHROLL, JUANITA		J								l
NAME	-		. 2.2 NAM		ADDRESS						Į
STREET ADDRESS				2.3 STREET ADDRESS							١.
CITY-ST-ZIP				3.1 TITLE				Char	nge	Addition	١
NAME	FRENCH, CHARLES						_		_	l	
STREET ADORESS	6503 19TH ST E			3.3 STREET ADDRESS		•					1
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NAME			4.21	AME	ļ						
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NAME			5.2 N	AME			•				l
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CITY-ST-ZIP		· i		5.4 CITY-ST-ZIP							
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NAME			6.2 N	AME	ļ					!	Ľ
STREET ADDRESS			6.3 S	TREET	ADDRESS						[
			640	ITV PT	710						1 :

14. I 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

20 April 99 941-127-1732