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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

FILED May 05, 1999 8:00 am Secretary of State Katherine Harris Secretary of State

05-05-1999 90188 039 ***150.00

DOCUMENT # P94000073631

QUALITY	FIRST PAINTING, INC.								
Principal Plac	e of Business	Mailing Address				- 100 160 110 511 010 01 01 11 01			19161 1185 1685
6561 TAYLOR RI	Ď.	6561 TAYLOR RD.							
#6		#6				DO NOT WE	DITE IN TUIC	CDACE	
Naples FL 3410	09	NAPLES FL 34109					RITE IN THIS	SPACE	
						3. Date Incorporated or Qualifer	u		
0.01.10	N	2e Mailing Address				10/03/1994 4. FEI Number			oplied For
	Place of Business	2a. Mailing Address				1			ot Applicable
21 Suito Ant	# 615	Suite, Apt. #, etc.				65-0525067	-,		Additional
Suite, Apt. #, etc.		27			5. Certifcate of Status Desired			equired	
City & Stat	te	City & State				6. Election Campaign Financing	·	\$5.00	May Be
— ·		28				Trust Fund Contribution	' 🗆		to Fees
23 Zip	Country	Zip	Cou	ntry		8. This corporation owes the cu	rrent vear Inta	naible	
24	25	29	30	•		Personal Property Tax.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐Yes	□No
241	9. Name and Address of Curr		1001	Γ		10. Name and Address of New	Registered A	Agent	
				81	Name				
	MAN, FRANCIS D			82	Street Addre	ess (P.O. Box Number is Not Accep	ntable)		
	25TH CRT SW				Outcot Fidure	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
NAPL	ES FL 34116			83		-			
				84	City			85 Zip	Code
			j	57	City		FL		
11. Pursuant	to the provisions of Sections 607.0	1502 and 607.1508, Florida Stat te of Florida, Such change was	tutes, the al	bove by t	-named corporation	oration submits this statement for the	ept the appoin	changing its	s registered egistered
office or r agent. I a SIGNATURE	registered agent, or both, in the Sta am familiar with, and accept the oblin Signature, typed or printed name of registered a	te of Florida. Such change was igations of, Section 607.0505, F	autnorized Torida Stati	ı by t ⊔tes.	tne corporatioi	n's board of directors. Frieleby acco	DATE		
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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.

6.4 CITY-ST-ZIP

SIGNATURE: