


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

FILED

May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Morton Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P94000074768 (0) 1. Corporation Name BEN DAVIS PAINTING CONTRACTOR, INC.					
Principal Place of Business 504 34TH ST WEST PALM BEACH FL 33407			Mailing Address 504 34TH ST WEST PALM BEACH FL 33407		
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		3. Date Incorporated or Qualified 10/12/1994 4. FEI Number 65-0560896 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 7. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent DAVIS, BEN 504 34TH ST WEST PALM BEACH FL 33407			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL		
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 1.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 1.5 TITLE 1.6 NAME 1.7 STREET ADDRESS 1.8 CITY-ST-ZIP 1.9 TITLE 1.10 NAME 1.11 STREET ADDRESS 1.12 CITY-ST-ZIP 1.13 TITLE 1.14 NAME 1.15 STREET ADDRESS 1.16 CITY-ST-ZIP 1.17 TITLE 1.18 NAME 1.19 STREET ADDRESS 1.20 CITY-ST-ZIP 1.21 TITLE 1.22 NAME 1.23 STREET ADDRESS 1.24 CITY-ST-ZIP 1.25 TITLE 1.26 NAME 1.27 STREET ADDRESS 1.28 CITY-ST-ZIP 1.29 TITLE 1.30 NAME 1.31 STREET ADDRESS 1.32 CITY-ST-ZIP 1.33 TITLE 1.34 NAME 1.35 STREET ADDRESS 1.36 CITY-ST-ZIP 1.37 TITLE 1.38 NAME 1.39 STREET ADDRESS 1.40 CITY-ST-ZIP 1.41 TITLE 1.42 NAME 1.43 STREET ADDRESS 1.44 CITY-ST-ZIP 1.45 TITLE 1.46 NAME 1.47 STREET ADDRESS 1.48 CITY-ST-ZIP 1.49 TITLE 1.50 NAME 1.51 STREET ADDRESS 1.52 CITY-ST-ZIP 1.53 TITLE 1.54 NAME 1.55 STREET ADDRESS 1.56 CITY-ST-ZIP 1.57 TITLE 1.58 NAME 1.59 STREET ADDRESS 1.60 CITY-ST-ZIP 1.61 TITLE 1.62 NAME 1.63 STREET ADDRESS 1.64 CITY-ST-ZIP 1.65 TITLE 1.66 NAME 1.67 STREET ADDRESS 1.68 CITY-ST-ZIP 1.69 TITLE 1.70 NAME 1.71 STREET ADDRESS 1.72 CITY-ST-ZIP 1.73 TITLE 1.74 NAME 1.75 STREET ADDRESS 1.76 CITY-ST-ZIP 1.77 TITLE 1.78 NAME 1.79 STREET ADDRESS 1.80 CITY-ST-ZIP 1.81 TITLE 1.82 NAME 1.83 STREET ADDRESS 1.84 CITY-ST-ZIP 1.85 TITLE 1.86 NAME 1.87 STREET ADDRESS 1.88 CITY-ST-ZIP 1.89 TITLE 1.90 NAME 1.91 STREET ADDRESS 1.92 CITY-ST-ZIP 1.93 TITLE 1.94 NAME 1.95 STREET ADDRESS 1.96 CITY-ST-ZIP 1.97 TITLE 1.98 NAME 1.99 STREET ADDRESS 2.00 CITY-ST-ZIP			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 2.5 TITLE 2.6 NAME 2.7 STREET ADDRESS 2.8 CITY-ST-ZIP 2.9 TITLE 2.10 NAME 2.11 STREET ADDRESS 2.12 CITY-ST-ZIP 2.13 TITLE 2.14 NAME 2.15 STREET ADDRESS 2.16 CITY-ST-ZIP 2.17 TITLE 2.18 NAME 2.19 STREET ADDRESS 2.20 CITY-ST-ZIP 2.21 TITLE 2.22 NAME 2.23 STREET ADDRESS 2.24 CITY-ST-ZIP 2.25 TITLE 2.26 NAME 2.27 STREET ADDRESS 2.28 CITY-ST-ZIP 2.29 TITLE 2.30 NAME 2.31 STREET ADDRESS 2.32 CITY-ST-ZIP 2.33 TITLE 2.34 NAME 2.35 STREET ADDRESS 2.36 CITY-ST-ZIP 2.37 TITLE 2.38 NAME 2.39 STREET ADDRESS 2.40 CITY-ST-ZIP 2.41 TITLE 2.42 NAME 2.43 STREET ADDRESS 2.44 CITY-ST-ZIP 2.45 TITLE 2.46 NAME 2.47 STREET ADDRESS 2.48 CITY-ST-ZIP 2.49 TITLE 2.50 NAME 2.51 STREET ADDRESS 2.52 CITY-ST-ZIP 2.53 TITLE 2.54 NAME 2.55 STREET ADDRESS 2.56 CITY-ST-ZIP 2.57 TITLE 2.58 NAME 2.59 STREET ADDRESS 2.60 CITY-ST-ZIP 2.61 TITLE 2.62 NAME 2.63 STREET ADDRESS 2.64 CITY-ST-ZIP 2.65 TITLE 2.66 NAME 2.67 STREET ADDRESS 2.68 CITY-ST-ZIP 2.69 TITLE 2.70 NAME 2.71 STREET ADDRESS 2.72 CITY-ST-ZIP 2.73 TITLE 2.74 NAME 2.75 STREET ADDRESS 2.76 CITY-ST-ZIP 2.77 TITLE 2.78 NAME 2.79 STREET ADDRESS 2.80 CITY-ST-ZIP 2.81 TITLE 2.82 NAME 2.83 STREET ADDRESS 2.84 CITY-ST-ZIP 2.85 TITLE 2.86 NAME 2.87 STREET ADDRESS 2.88 CITY-ST-ZIP 2.89 TITLE 2.90 NAME 2.91 STREET ADDRESS 2.92 CITY-ST-ZIP 2.93 TITLE 2.94 NAME 2.95 STREET ADDRESS 2.96 CITY-ST-ZIP 2.97 TITLE 2.98 NAME 2.99 STREET ADDRESS 3.00 CITY-ST-ZIP		



DO NOT WRITE IN THIS SPACE

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.

SIGNATURE: **BEN DAVIS** *Ben Davis*

5-3-98 **561 848635**
561 8425148

CR2E034 (10/97)