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May 01 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000015367 (2)

1. Corporation Name

NATIONAL PAINTERS COMPANY

Principal Place of Business

2931 7TH STREET NORTH
ST. PETERSBURG FL 33704

Mailing Address

2931 7TH STREET NORTH
ST. PETERSBURG FL 33704

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/23/1995

4. FEI Number

59-3308783

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 1460 Gulf Blvd

Suite, Apt. #, etc.

22 1202

City & State

23 Clearwater FL

Zip

24 33767

Country

25 USA

2a. Mailing Address

26 1460 Gulf Blvd #1202

Suite, Apt. #, etc.

27 1202

City & State

28 Clearwater FL

Zip

29 33767

Country

30 USA

9. Name and Address of Current Registered Agent

IGNACIO, EDMOND LIHIVAI
2931 7TH ST N
ST PETERSBURG FL 33704

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1460 GULF BLVD #1202

83

Clearwater, FL

84 City

FL

85 Zip Code

33767

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 Edmond Lihivai Ignacio Edmond Lihivai Ignacio Vicepres

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D
NAME IGNACIO, EMA
STREET ADDRESS 2931 7TH STREET NORTH
CITY-ST-ZIP ST. PETERSBURG FL 33704

TITLE ☐ DELETE

V
NAME IGNACIO, EDMOND LIHIVAI
STREET ADDRESS 2931 7TH ST N
CITY-ST-ZIP ST PETERSBURG FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE
1.2 NAME D Ignacio, EMA
1.3 STREET ADDRESS 1460 GULF BLVD #1202
1.4 CITY-ST-ZIP CLEARWATER, FL 33767

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME V Ignacio, Edmond Lihivai
2.3 STREET ADDRESS 1460 GULF BLVD #1202
2.4 CITY-ST-ZIP Clearwater, FL 33767

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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: Edmond Lihivai Ignacio Edmond Lihivai Ignacio 1-9-98 8135935847

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