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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

P95000027450 (2) DOCUMENT #

**FILED** Apr 15 1998 8:00am Secretary of State

UNVID	SMOOT PAINTING, INC.				
Principal Place	e of Business	Mailing Address			JOHE URIN 1889 ELBEN BINN ERN LOCK
		5120 14TH ST WEST			
5120 14TH ST WEST 5120 14TH ST WEST LOT 5					
BRADENTON FL \$4203 BRADENTON FL 34203				DO NOT WRITE IN	I THIS SPACE
				3. Date Incorporated or Qualified	
9 Principal P	lace of Business	2a. Mailing Address		04/03/1995 4. FEI Number	Applied For
21 851	5 Baysnory Rd		yshora Rd		Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	95000	1 .	SR 75 Additional
22 Lot	132	27 hot 132		5. Certificate of Status Desired	Fee Required
City & State	and the second second	City & State		6. Election Campaign Financing	\$5.00 May Be
	netto , t.L.	28 Kalmetto		Trust Fund Contribution	Added to Fees
Zip 24 3423	Country	29 34221 34	Country  USA	8. This corporation owes or has paid	
24 542	25 USG.  Name and Address of Current		1 4 JA	Personal Property Tax due June 30 10. Name and Address of New Regis	
SM	OOT, DAVID E		81 Name		
EAGO AATU OT WEST			82 Street Add	ress (P.C. Box Number is Not Acceptable)	
LOT 5			8515	Bayshore Rd.	,
	ADENTON FL 34203		83 / 4		
			84 City	132	85 Zip Code
			Palr	netto	F <u>L   34221                                  </u>
11. Pursuant t	to the provisions of Sections 607.0502 poistered agent, or both, in the State of	and 607.1508, Florida Statutes, of Florida Such change was aut	the above-named corp horized by the corpora	poration submits this statement for the purition's board of directors. I hereby accept t	pose of changing its registered he appointment as registered
agent. I ar	m familiar with, and accept the obligat	ions of, Section 607,0505, Floric		tion's board of directors. I hereby accept t	11 to di
SIGNATURE		<i>D</i> (	9VID E. SA legistered Agent signature requi	noot PRES.	4/10/98
12,	Signature, typed or printed name of registered agen OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICER	RS AND DIRECTORS IN 12
TITLE	P	DELETE	11 TITLE P		Change Addition
NAME	SMOOT, DAVID E.	•	12 NAME 5 1	MOOT DAVID E.	
STREET ADDRESS	5120 14TH ST WEST		1.3 STREET ADDRESS 😽	515 Bayshore Rd	LOT 132
CITY-ST-ZIP	BRADENTON FL 34203		1.4 CITY-ST-ZIP R	almetto, FL. 34281	
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		☐ DELE <b>te</b>	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. CITY-ST-ZIP		Change Addition
TITLE		P. NETELE	4.1 TITLE		Clasife C Vondon
NAME CYPECT ADDRESS			4. 2 NAME		
STREET ADORESS	f - 1		4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		ייין אפווטווט ביין
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

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:

CITY-ST-ZIP

DAVID E. SMOOT

PRES

4/10/98

941-722-6784