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**

DOCUMENT # P95000038749 (4)

DYAL PAINTING CONTRACTORS, INC.

FILED Apr 02 1998 8:00am Secretary of State

Delegiant Charge of Strainses						
Principal Place of Business Mailing Address						
4307 LEWIS AVENUE 4307 LEWIS AVENUE SEBRING FL 33872 SEBRING FL 33872						
SEBAING FL 33872 US		US			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					05/15/1995	
2. Principal Pi	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0619376	Not Applicable
Suite, Apt.	#, e1c.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State			B. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Coun	try	8. This corporation owes or has paid the curre	
24	25	29	30	•		Yes No
24	g. Name and Address of Currer				10. Name and Address of New Registered A	gent
DY	AL, DONALD O] (Name		
· 4612 LEWIS AVENUE				32 Street Add	ress (P.O. Box Number is Not Acceptable)	
	BRING FL 33872		1	oli del Addi	1033 (1.0. DOX Hambal to Hat Accoptancy	
	514114 1 E 0007 E		Ī	33		
•			<u> </u>	34 City		85 Zip Code
			1	1 7	FL	1 1 1
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida S	tatutes, the ab	ove-named corp	poration submits this statement for the purpose of tion's board of directors. I hereby accept the apport	changing its registered
office or r agent. I a	egistered agent, or both, in the State im feromer with, and accept the outling	e of Florida. Such change v Nitions 📤 Section 607.0505	vas autnorized 5. Florida Statu	by the corporal tes.	tion's board of directors, I hereby accept the appoint	animent as registered
SIGNATURE	• •					
SIGNATIONE	Signature, typed or printed name of registered equ	<u> </u>	(NOTE: Registered	Agent signature requi	ired when reinstating) DATE	
12.		ID DIRECTORS	13.	<u> </u>	ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	P	☐ DELETE				Change Addition
NAME	DYAL, BENNY O	1	1.2 NAM			
STREET ADDRESS	RT 14 BOX 486 (AV/P)		1.3 STR	EET ADORESS		
CITY-ST-ZIP	SEBRING FL			r-ST-ZIP		
TITLE	<u> </u>				· ·	Change Addition
NAME	DYAL, EVELYN G	4)	2.2 NAM			
STREET ADDRESS	RT 14 BOX 486 (77 / 1	ν		EET ADDRESS	_	
CITY-ST-ZIP	LAKE CITY FL			Y - ST - ZIP		Change Addition
TITLE	VP.	DELETE		l		Change Addition
NAME	DYAL, DONALD		3.2 NA)			ļ
STREET ADDRESS	4307 LEWIS AVE.			EET ADDRESS		1
CITY-ST-ZIP	SEBRING FL	- Delete		Y-ST-ZIP		Change Addition
TITLE		☐ DELETE		•		L CHANGE L AUGINDIN
NAME			4. 2 NA			!
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP		T program		Y-ST-ZIP		Change Addition
TITLE		☐ DELETE		1		The relation of the relations
NAME			5.2 NAI			
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		Observe Address
TITLE		☐ DELETE				Change Addition
NAME			6.2 NA	ME		
STREET ADDRESS			6.3 STF	REET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		THE ALL CALLS OF THE STREET
44 Ihorobyo	cortify that the information symplicidy	with this filling does not oug	lity for the eyes	motion stated in	Section 119.07(3)(i). Florida Statutes. I further ce	rity that the information 1

Indicated on this annual report or supplied with this nining does not quality for the exemption stated in Section 1.19.07(5)(f), Florida Statutes, Indicates a further certification 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 chapter 6, or on an attachment with an address.

(Opnallo, Oval)

(941) 385-2171