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

PROFIT
CORPORATION
ANNUAL REPORT
1997

STREET ADDRESS CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000039062 (1)

PROFESSIONAL PAINTING & PAPERHANGING, INC.

FILED Apr 18 1997 8:00am Secretary of State

Principal Place of Business 1012 8 EDGEWOOD AVE JACKSONVILLE FL 32205 US		Mailing Address 1012 S EDGEWOOD AVE JACKSONVILLE FL 32205-5343 US			
				3. Date Incorporated or Qualified 05/17/1995	3a. Date of Last Report 04/25/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3317903 5. Certificate of Status Desired	Not Applicable \$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 Zip	Country	1 rust Fund Contribution 8. This corporation has liability for	Added to Fees
24	25	29	30	Florida Statutes] Yes □ No
	9. Name and Address of Curren	I Registered Agent	B1 Name	10. Name and Address of New Re	gistered Agent
BASTIANELLI, ANTHONY 1012 S EDGEWOOD AVE					*** **********************************
JACKSONVILLE FL 32205			82 Street Addr	ess (P.O. Box Number is Not Acceptab	ole)
1			63		
1			84 City		EI 85 Zip Code
11. Pursuant office or agent. I a				oration submits this statement for the plon's board of directors. I heroby acception's	ourpose of changing its registered of the appointment as registered
	Signature, typed or printed hanc of registered age OFFICERS ANI	the contract of the contract o	Registered Agent signature require	ed when reinstaling) ADDITIONS/CHANGES TO OFFIC	DATE
12.	PD OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	BASTIANELLI, ANTHONY J		1.2 NAME		
STREET ADDRESS	3216 RANDALL STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	JACKSONVILLE FL 32205	DECETE	1.4 CITY - ST - 7IF		Change Addilion
NAME	GIAMPETRO, MARK A	E COLUMN	2.2 NAME		
STREET ADDRESS	3216 RANDALL STREET		2.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32205		2.4 CITY - ST - ZIP		
NAME	STD Chack, Larry C	DELFTE	3.1 TITLE 3.2 NAME		Change Addition
STREET ADDRESS	3216 RANDALL STREET		3.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32205		3.4. CITY - \$1 - ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME CARCET ADDRESS			4. 2 NAME		
STREET ADDRESS CITY-ST-ZIP			4.3 STREET ADDRESS = 4.4 CITY - ST- ZIP		
TITLE		DELETE	5.1 TOLE	99 along the 1895 (Menter of the State Bost, and additional control of the State and the State and State a	Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY+ST+ZIP 6.1 TITLE		Change Addition

14. I do hereby certify that the information supplied with this filling 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 eath; that I am an officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name