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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1998 DOCUMENT # 1. Corporation Name P95000048075 (2)

ORLA	ando plaster & stucc	O, INC.				HALL LANK FANN HALL CON LEAD	
Principal Place of Business Mailing Address					- I IOBUIDEN ELE (BIEL BUILE BURK DUKKI OOLI) OOLII B	idal iskul satik saadi siil ossi	
1102 ATLA ORLANDO		1102 ATLANTA AVE. ORLANDO FL 32806			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
L					06/16/1995		
2. Principa	al Place of Business	2a. Mailing Addr	ess		4, FEI Number	Applied For	
21		26			59-3319107	Not Applicab	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & S	tale	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country 25	Z(p)	Country 30	,	This corporation owes or has paid the corporate Property Tax due June 30.	current year Intangible	
	g, Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Registered Agent			
TURNER, PATRICK 1102 ATLANTA AVE. ORLANDO FL 32808			81	2 Street Address (P.O. Box Number is Not Acceptable)			
			83	City	F	85 Zip Code	
11. Pursua office of	int to the provisions of Sections 607 or registered agent, or both, in the S	.0502 and 607.1508, Florid State of Florida, Such chan	ia Statutes, the above go was authorized by	e-named corp the corporati	oration submits this statement for the purpose ion's board of directors. I hereby accept the ap	of changing its registered opointment as registered	

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										
0,0.0.0	Signature, typed or pitated name of registered agent and little applicable	(NOTE: R	egistered Agent signature	required when reinstaling)	DATE					
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICE						
TITLE		DELETE	1.1 TITLE		Change	Addition				
NAME	TURNER, PATRICK		1.2 NAME							
STREET ADDRESS	1102 ATLANTA AVE.		1.3 STREFT ADDRESS			ĺ				
CITY-SY-ZIP	ORLANDO FL 32806		1.4 CITY-ST-ZIP							
TITLE		DELETE	2.1 TITLE		Change	Addition				
NAME			2.2 NAME							
STREET ADDRESS			2.3 STREET ADDRESS							
CITY-ST-Z#P			2. 4 CITY - ST - ZIP							
TITLE		DELETE	3.1 TITLE		Change	Addition				
NAME			3.2 NAME							
STREET ADDRESS			3.3 STREET ADDRESS							
CITY-ST-ZIP			3.4. CITY-ST-ZIP							
TITLE		DELETE	4.1 TITLE		Change	☐ Addition				
NAME			4. 2 NAME							
STREET ADDRESS	1		4.3 STREET ADDRESS							
CITY-ST-ZIP			44 CITY-ST-ZIP							
TITLE		DELETE	5.1 TITLE		Change	Addition				
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREET ADDRESS							
CITY-ST-ZIP			5.4 CITY - ST - ZIP							
TITLE		DELETE	61 TITLE	· · · · · · · · · · · · · · · · · · ·	Change	Addition				
NAME			6.2 NAME							
STREET ADDRESS			6.3 STREET ADDRESS			l l				
CITY-ST-ZIP			6.4 CITY-ST-ZIP							

14. Thereby 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 recover or frusted 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

FILED

May 19 1998 8:00am

Secretary of State