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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000053621 (5)

P & I INDUSTRIAL PAINTING, INC.

Principal Place of Business Mailing Address

1412 GULF ROAD 1412 GULF ROAD TARPON SPRINGS FL 34689-2715

FILED May 13 1997 8:00am Secretary of State



1412 GULF ROAD TARPON SPRINGS FL 34689		1412 GULF ROAD TARPON SPRINGS FL 34689	1412 GULF ROAD TARPON SPRINGS FL 34689-2715					
					3. Date Incorporated or Qualified 07/12/1995	3a. Date of L		
	Place of Business	28. Mailing Address	 7		4- FEI Number		Applied For	
Suite, Apt. #, etc.		26			<u> </u>		Not Applicable	
22		Suite, Apt. #, etc.	[27]		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & State			Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees	
Zip 24	Country Zip Country 25 29 30			у	8. This corporation has liability for intengible tax under s. 199.032, Florida Statutes			
	9. Name and Address of Cu	rrent Registered Agent		T	10. Name and Address of New Reg	Istered Agent		
	s, Michael e esq		61	Name				
114 S. PINELLAS AVE. TARPON SPRINGS FL 34689				2 Street Address (P.O. Box Number is Not Acceptable)				
			83	3				
			84	City		FL 85	Zip Code	
11. Pursuant	to the provisions of Sections 607	.0502 and 607.1508, Florida Statute	s, the above	/e-named corpora	poration submits this statement for the pu	rmone of observe	ing its registered	
	am Value Andreas	vijestija (1. Section 607 0505, Flor	ida Stalute	es.	tion's board of directors. I hereby accep	i ije appolitne	it as registered	
SIGNATURE	agnatidie typod or plinted name of registere	d agent and title if applicable (NO1):	Hogisterea Ad	nent Signature regu	ired when reinstaling)	DAT		
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIREC	TORS IN 12	
TITLE	DATECAS OFOROM	DELETE	1.1 TITLE			☐ Cha	nge 🔲 Additron	
NAME	PATERAS, GEORGIA 1412 GULF ROAD		1.2 NAME					
STREET ADDRESS	TARPON SPRINGS FL 346	RQ		1 ADDRESS				
CITY-ST-ZIP TITLE	17411 011 011111111111111111111111111111	DELETE	14 CHY - 21 HHLE	S1-ZIP		Cha	nge Addition	
NAME			22 NAME			0116	inge [] Addition	
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			2 4 CITY					
TITLE	DELETE		3 1 TITLE			Cha	nge Addition	
NAME			32 NAME					
STREET ADDRESS			3 3 STREE	1 ADDRESS				
CITY-ST-ZIP			3 4. CITY-	\$1 - ZIP				
TITLE		☐ DELFTE	4.1 TITLE			L Cha	nge [] Addition	
NAME OVERT ADORESE			4. 2 NAME					
STREET ADORESS CITY-ST-ZIP			1	1 ADDRESS				
TITLE	<u> </u>	DOLFTE	4.4 CITY- 5.1 TITLE	21-711,		Cha	nge Addition	
NAME			5.2 NAME			F=-1 O110	-wy∞	
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			5.4 GITY-					
TITLE		DELETE	6.1 TIFLE			☐ Cha	nge Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	I ADDRESS				
CITY-ST-ZIP			6.4 CITY-	S1- <i>2</i> (P				

4. I do 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 directory if 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 Myck 13 if changed, or on an attachment with an address

Jensason Antas a visco de la

11 20,00

(811) 927-1700