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PROFIT CORPORATION . ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

P95000084942 (8) DOCUMENT #
1. Corporation Name

U.S. AERO PAINT, INC.

Principal Place of Business

Mailing Addrage



	IH WEST 15TH AVENUE RDALE FL 33309	5601 NORTH WEST 15T FT. LAUDERDALE FL 33		•				
			•		3. Date Incorporated or Qualified 11/01/1995	3a. Date	of Last F	Report
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number	-l		Applied For
21		26	26		65-0618175			Not Applicable
Suite, Ap		Suite, Apt. #, etc.			5. Certificate of Status Desired			5 Additional Required
City & Sta		City & State	1		Election Campaign Financing Trust Fund Contribution			00 May Be ed to Fees
Zip 24	Country 25	7ip 29	Counti 30	ry 	8. This corporation has liability for in Florida Statutes	□ No		199.032,
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New R	egistered /	Agent	
HAVE	DIQUIADO.		В	1 Name				
4 5601 N), RICHARD NORTH WEST 15TH AVENUE		8		iress (P.O. Box Number is Not Acceptab	le)		
, FI. LA	UDERDALE FL 33309		l _s	3				
1			8	1		FL		ip Code
familiar v	ered agent, or both, in the State of Fi with, and accept the obligations of, Se	onda. Such change was authorized	i, the above I by the cor	e-named corpo rporation's boa	oration submits this statement for the pur ard of directors. I hereby accept the appo	pose of cha pintment as	nging its registered	registered office d agent. I am
SIGNATURE:	·							
	 Signature, broad or printed pages of registered an 	ent acclifitie. La collectulo. (NIOTA)	 Domintours of Ass 					
	Signature, typica or printed name of registered ag OF FICE RS A			ent signature require	ed when reinstaling) ADDITIONS/CHANGES TO DEST	DATE CEBS AND	DIDECTO	7DG INI 10
12.	OFFICERS A	ent and title 1 applicable (NOTE ND DIRECTORS DELETE	13.		ed when reinstaling: ADDITIONS/CHANGES TO OFFI	CERS AND		
12.	OFFICERS A	AND DIRECTORS	13. 1.1 Hill	E		CERS AND	DIRECTO Change	ORS IN 12
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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 all an attachment with an address.

SIGNATURE:

May 1 5 96 954 493-9660