

FILED
Jul 22 1998 8:00am
Secretary of State

<div>PROFIT CORPORATION ANNUAL REPORT 1998</div>		<div>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</div>		<div>Jul 22 1998 8:00am Secretary of State</div>	
<div>DOCUMENT # P95000095775 (9) 1. Corporation Name PROMONT PAINTING CONTRACTORS, INC.</div>					
<div>Principal Place of Business 5200 SW 57 STREET DAVE FL 33314</div>		<div>Mailing Address 9715 W. BROWARD 337 PLANTATION FL 33314 US</div>		<div>DO NOT WRITE IN THIS SPACE</div>	
<div>2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country</div>		<div>2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country</div>		<div>3. Date Incorporated or Qualified 12/19/1995 4. FEI Number 65-0652242 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.</div>	
<div>9. Name and Address of Current Registered Agent DUMONT, MICHAEL R 5200 SW 57 STREET DAVE FL 33314</div>			<div>10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code</div>		
<div>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.</div>					
<div>SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</div>					
<div>12. OFFICERS AND DIRECTORS TITLE PS NAME DUMONT, MICHAEL R. STREET ADDRESS 5200 SW 57TH ST. CITY-ST-ZIP DAVE FL</div>			<div>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP</div>		
<div>TITLE NAME STREET ADDRESS CITY-ST-ZIP</div>			<div>2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP</div>		
<div>TITLE NAME STREET ADDRESS CITY-ST-ZIP</div>			<div>3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP</div>		
<div>TITLE NAME STREET ADDRESS CITY-ST-ZIP</div>			<div>4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP</div>		
<div>TITLE NAME STREET ADDRESS CITY-ST-ZIP</div>			<div>5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP</div>		
<div>TITLE NAME STREET ADDRESS CITY-ST-ZIP</div>			<div>6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP</div>		

CR2E034 (5/98)

14. I 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 director of the corporation, partnership or limited-liability company to which this report is required to be filed; that I am authorized 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 in the attachment with an address.

SIGNATURE: