

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90202 011 ***150.00

DOCUMENT # P95000095775

1. Corporation Name
PROMONT PAINTING CONTRACTORS, INC.

Principal Place of Business
5200 SW 57 STREET
DAVIE FL 33314

Mailing Address
9715 W. BROWARD
337
PLANTATION FL 33314
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/19/1995

4. FEI Number
65-0652242

Applied For
Not Applicable

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 the current year Intangible Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 9715 W. Broward Blvd.

26 9715 W. Broward Blvd.

22 Suite, Apt. #, etc. Suite # 337

27 Suite, Apt. #, etc. Suite # 337

23 City & State Plantation FL

28 City & State Plantation FL

24 Zip 33324 25 Country U.S.

29 Zip 33324 30 Country U.S.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DUMONT, MICHAEL R
5200 SW 57 STREET
DAVIE FL 33314

81 Name Dumont, Michael Richard
82 Street Address (P.O. Box Number is Not Acceptable) 9715 W. Broward Blvd
83 Suite # 337
84 City Plantation FL 85 Zip Code 33324

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PS
NAME DUMONT, MICHAEL R.
STREET ADDRESS 5200 SW 57TH ST.
CITY-ST-ZIP DAVIE FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President
1.2 NAME Dumont, Michael Richard
1.3 STREET ADDRESS 9715 W. Broward Blvd. # 337
1.4 CITY-ST-ZIP Plantation, FL 33324

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/99 954-295-4122
Date Daytime Phone #

CR2E034 (11/98)

000957