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

PROFIT CORPORATION ANNUAL REPORT

1998

TITLE

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STREET ADDRESS

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CITY-ST-ZIP

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 25 1998 8:00am

Secretary of State

☐ Change

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Addition

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Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000097825 (0)

MASTER MAINTENANCE & PAINTING, CO.

Principal Place of Business Mailing Address 1009 CORAL CT P O BOX 4441 **BOYNTON BEACH FL 33426 BOYNTON BEACH FL 33424** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/28/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0634694 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 Yes ☐ No 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FILINGS, INC. 3732 NW 16TH ST 82 Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33311 83 84 Zip Code 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) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change Addition **HULBERT, JAMES** NAME 1.2 NAME 1009 CORAL COURT STREET ADDRESS 1.3 STREET ADDRESS **BOYNTON BEACH FL 33426** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change Addition NAME **HULBERT, ERIC** 22 NAME 1009 CORAL CT STREET ADDRESS 2.3 STREET ADDRESS **BOYNTON BEACH FL** CITY-ST-ZIP 2. 4 CITY - ST - ZIP

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 regiver 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 chappent, or on an affectment with an address.

3.1 TITLE

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

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