

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

FILED

Apr 09 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000007533 (8)

1. Corporation Name  
VILPRO PAINTING CORP.

Principal Place of Business 15484 SW 110 TERRACE MIAMI FL 33196	Mailing Address 15484 SW 110 TERRACE MIAMI FL 33196
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 16091 SW 83rd Street Suite, Apt. #, etc. 22 City & State 23 Miami, FL Zip 24 33193		2a. Mailing Address 26 16091 SW 83rd St. Suite, Apt. #, etc. 27 City & State 28 Miami, FL Zip 29 33193		Country 30 USA		3. Date Incorporated or Qualified 01/24/1996		4. FEI Number 65-0636962		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required						6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees					
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No											

9. Name and Address of Current Registered Agent VILLACIS, CARLOS E 15484 SW 110 TERRACE MIAMI FL 33196				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 16091 SW 83rd Street 83 84 City Miami FL 85 Zip Code 33193			
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE		1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	VILLACIS, CARLOS A			1.2 NAME			
STREET ADDRESS	15484 SW 110 TERRACE			1.3 STREET ADDRESS	16091 SW 83rd Street		
CITY-ST-ZIP	MIAMI FL 33196			1.4 CITY-ST-ZIP	Miami, FL 33193		
TITLE	VD	<input type="checkbox"/> DELETE		2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	VILLACIS, CARLOS E			2.2 NAME			
STREET ADDRESS	15484 SW 110 TERRACE			2.3 STREET ADDRESS	16091 SW 83rd Street		
CITY-ST-ZIP	MIAMI FL 33196			2.4 CITY-ST-ZIP	Miami, FL 33193		
TITLE	SD	<input type="checkbox"/> DELETE		3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	VILLACIS, RICHARD S			3.2 NAME			
STREET ADDRESS	15484 SW 110 TERRACE			3.3 STREET ADDRESS	16091 SW 83rd Street		
CITY-ST-ZIP	MIAMI FL 33196			3.4 CITY-ST-ZIP	Miami, FL 33193		
TITLE	VD	<input type="checkbox"/> DELETE		4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	PROANO, SANTIAGO A			4.2 NAME			
STREET ADDRESS	15484 SW 110 TERRACE			4.3 STREET ADDRESS	16091 SW 83rd Street		
CITY-ST-ZIP	MIAMI FL 33196			4.4 CITY-ST-ZIP	Miami, FL 33193		
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				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.

SIGNATURE  3/30/98 387-3775

CR2E034 (10/97)