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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Feb 23 1998 8:00am Secretary of State

	MENT # P96000 E'S CHOICE PAINTING INC				11818 11816 1814 BB118 BB11 1881
Principal Place	e of Business	Mailing Address		I IDBNIDEN NIC HENRY BRUN CONN ODNN BRUN DAND	ABIO INDIO NAMA ODNO IDNI IDDI
13440 SW 5TH ST 13440 SW 5TH ST					
DAVIE FL 33325 DAVIE FL 33325				DO NOT WOITE IN TI	IIC CDAOE
				DO NOT WRITE IN TH	IIS SPACE
				03/11/1996	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-066716 k9 **	Not Applicable
		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	City & State City & State		· •		Fee Required
_ ·	_			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	Trust Fund Contribution 8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes No
=-1	g, Name and Address of Currer		100	10. Name and Address of New Register	ed Agent
FEI	RNANDES, JOSEPH F		81 Name	•	
13440 SW 5TH ST			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
DAVIE FL 33325					
			83		İ
			84 City		85 Zip Code
44 Durament	to the provisions of Sections 607.050	20 and 607 1509 Florida Plate	des the shows pared one	poration submits this statement for the purpose	L B9 Zip Code
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 little if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AN	D DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Change Addition
NAME	FERNANDES, JOSEPH F	L. Detere	1.2 NAME		CT CHANGE CT ADDITION
STREET ADDRESS	13440 SW 5TH ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	DAVIE FL 33325		1.4 CITY-ST-ZIP		
TITLE	D	DELETE	2.1 TITLE	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition
NAME	OLIVEIRA, ROBERT		2.2 NAME		
STREET ADDRESS	13440 SW 5TH ST		2.3 STREET ADDRESS	15	
CITY-ST-ZIP	DAVIE FL 33325		2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME			4. 2 NAME		C custific C victions
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS	•	
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELET E	6.1 TITLE		Change Addition
NAME	1		6.2 NAME		
STREET ADDRESS	A control of the cont		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 A P Christian Control F France Price & 2/1/98

CR2E034 (10/9