## 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

## DOCUMENT # P96000033727

## **FILED** Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90014 029 \*\*\*150.00

DUED D	HINO PAINTING, INC.				
חרובט חי	MINO PAINTING, INC.			1 (00)(08) (18 10)(0 0)(18 00)(1 00)(1 00)(1 00)(1 00)	
Principal Place	e of Business	Mailing Address		\$ 10011081 IED 18160 BLING BRIEF BREEF BRIEF	## 116### 1999 1000## 1900 1000 1000
1731 NW FIRST TERRACE 1731 NW FIRST TERRACE				 	
POMPANO BEACH FL 33060 POMPANO BEACH FL 33060			1	DO NOT WRITE IN TH	S SPACE
				3. Date Incorporated or Qualifed	
				04/15/1996	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 123 1	(III) IS HARAGE	26 133 NW 1S1	HURACE	65-0689182	Not Applicable
Suite, Apt.	#, etc.	Sude, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & Stat	te de la	City & State	an Caron	6. Election Campaign Financing	\$5.00 May Be
23 VDMP	AND BOACH 1101UI)K	28 PIMPANU FO	POH, POMJA	Trust Fund Contribution	Added to Fees
390 m	Control of the contro	- 38 A/ X	Country AAA	8. This corporation owes the current year !	
24 5500	)  25  (SIDIUM)		30 KNÓWAW)	Personal Property Tax.  10. Name and Address of New Registere	Yes No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registere	1 Agent
KHA	IN, BONNY D				
1731 NW FIRST TERRACE			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
POM	IPANO BEACH FL 33060		83		
			84 City	F	L 85 Zip Code
11. Pursuant office or r	to the provisions of Sections 607,0502 registered agent, or both, in the State of	and 607.1508, Florida Statutes of Florida. Such change was aut	s, the above-named corporation that the corporation of the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the app	ointment as registered
ſ	im familiar with, and accept the obligati	ons of, Section 607.0505, Flori	ua Statutes.		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Agent signature require		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	P	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	KHAN, BONNY		1.2 NAME		
STREET ADDRESS			1.3 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BCH FL		14 CITY-ST-ZIP		Change Addition
TITLE	VP	☐ DELETE	2.1 TITLE		Change Addition
NAME	KHAN, ADAM		2 2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BCH FL	☐ DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		☐ Change ☐ Addition
TITLE			3.2 NAME		_ •
NAME			3.3 STREET ADDRESS		
STREET ADDRESS			3.4. CITY-ST-ZIP		
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME		<del>-</del>	4. 2 NAME		
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		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
0.71 OT 710			6.4 CITY-ST-ZIP		

14-1 tereby 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 section indicated on this annual report or supplemental annual section 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 of trustage encourage 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 of trustage encourage.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRE