

01-03
FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED

03 FEB 10 PM 2:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000040103

1. Entity Name

PERFECT PAINTING SOLUTIONS, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4181 N.W. 1 AVENUE

3. Mailing Address

4181 N.W. 1 AVENUE

Suite, Apt. #, etc.

SUITE # 4

Suite, Apt. #, etc.

SUITE # 4

DO NOT WRITE IN THIS SPACE

City & State

BOCA RATON FLORIDA

City & State

BOCA RATON FLORIDA.

4. FEI Number

6506633767

Applied For

Not Applicable

Zip

33431

Country

U.S.

Zip

33431

Country

U.S.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name MICELL, LAURENCE G ESQ.

Street Address (P.O. Box Number is Not Acceptable)

737 E. ATLANTIC BLVD.

City POMPAÑO BEACH

FL

Zip Code
33060

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

MICELL, LAURENCE G ESQ.

1/20/2003

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

P
BETANCOURT, FERNANDO
4181 N.W. 1 AVENUE SUITE #4
BOCA RATON FL 33431

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

V.S.
BECKER, MARRY
4181 N.W. 1 AVENUE SUITE # 4
BOCA RATON FL 33431

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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700011993907
02/07/03--01080--014 **450.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

F. BETANCOURT

1/20/2003

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)

2413

MICHAEL KRAVATZ C.P.A.

4747 HOLLYWOOD BLVD #104
HOLLYWOOD, FL. 33021

Phone 954-987-6934
Fax 954-987-6934

January 15, 2003

Division of Corporations
P.O Box 6327
Tallahassee, Fl. 32314
Re: Perfect Painting Solutions, Inc. 65-0663767
Inactive Status

Gentlemen:

The above named corporation did not file its annual report for the past several years because the uniform business report was mailed to the wrong address and my client never received these forms. In addition my client has been under extreme grief due to the serious illness of his wife, he forgot about these reports.

It is requested that all filing penalties be waived due to these circumstances.

Please mail all past due and current reports to 4181 NW 1st Ave. Suite 4 Boca Raton, Fl. 33431 as soon as possible. The back and present reports will be paid immediately. Thank you in advance for your understanding.

Sincerely,


Michael Kravatz C.P.A.