

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

FILED

Apr 29 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000073078 (3)**

1. Corporation Name
BTH PAINTING INC.

Principal Place of Business

**814 S.E. 46 LANE
CAPE CORAL FL 33904**

Mailing Address

**814 S.E. 46 LANE
CAPE CORAL FL 33904-8833**

3. Date Incorporated or Qualified

08/29/1996

3a. Date of Last Report

2. Principal Place of Business

21 **809 SE 47th St.**

Suite, Apt. #, etc.

22

City & State

23 **Cape Coral, FL**

Zip

24 **33904**

Country

25 **USA**

2a. Mailing Address

26 **809 SE 47th St.**

Suite, Apt. #, etc.

27

City & State

28 **Cape Coral, FL**

Zip

29 **33904**

Country

30 **USA**

4. FEI Number

650691792

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

**DERAU, STEVEN V
814 S.E. 46 LANE
CAPE CORAL FL 33904**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.050 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

Steven Derau

(NOTE: Registered Agent signature required when reinstating)

DATE

4-7-97

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **DERAU, STEVEN V**
STREET ADDRESS **1412 S.W. 27 TERRACE**
CITY-ST-ZIP **CAPE CORAL FL 33914**

TITLE **D** ☐ DELETE

NAME **LENTO, THOMAS**
STREET ADDRESS **1305 S.W. 27 TERRACE**
CITY-ST-ZIP **CAPE CORAL FL 33914**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

14. I do 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:

Steven Derau

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-7-97

Date

(941) 549-1688

Daytime Phone #

0397076

CR2E034 (9/96)