

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

FILED

Feb 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra S. Morton Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000074330 (7)**

1. Corporation Name
BALIUS PAINTING, INC.



Principal Place of Business P O BOX 5856 KEY WEST FL 33045	Mailing Address P O BOX 5856 KEY WEST FL 33045
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 724 Prado Circle Suite, Apt. #, etc. 22 Key West, FL City & State 23 33040 Zip 24 Monroe Country		2a. Mailing Address 25 724 Prado Circle Suite, Apt. #, etc. 27 Key West City & State 28 33040 Zip 29 Monroe Country		3. Date Incorporated or Qualified 09/03/1996	
4. FEI Number 65-0702169		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input checked="" 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

**BALIUS, MARTHA
724 PRADO CIR
KEY WEST FL 33040**

10. Name and Address of New Registered Agent

81 Name Ervin Balius	82 Street Address (P.O. Box Number is Not Acceptable) 724 Prado Circle	83 Key West	84 City	85 FL	Zip Code 33040
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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 *Ervin Balius* **President - Ervin Balius** **1-7-98**
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	<input type="checkbox"/> DELETE	1.1 TITLE President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BALIUS, ERVIN		1.2 NAME Balius, Ervin	
STREET ADDRESS P O BOX 5856		1.3 STREET ADDRESS 724 Prado Circle	
CITY-ST-ZIP KEY WEST FL 33045		1.4 CITY-ST-ZIP Key West, FL 33040	
TITLE D	<input type="checkbox"/> DELETE	2.1 TITLE Use President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BALIUS, MARTHA		2.2 NAME Martina Balius	
STREET ADDRESS P O BOX 5856		2.3 STREET ADDRESS 724 Prado Circle	
CITY-ST-ZIP KEY WEST FL 33045		2.4 CITY-ST-ZIP Key West, FL 33040	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
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 *Ervin Balius* **1-7-98**

CR2E034 (10/97)