## 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

## DOCUMENT # P96000075627 (5)

G'S PAINTING AND PRESSURE CLEANING, INC.

Principal Place of Business Mailing Address 711 CHERRY BLOSSOM COURT 711 CHERRY BLOSSOM COURT NAPLES FL 34120 NAPLES FL 34120 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/11/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 21 26 <u>59-34 190 15</u> Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country **Z**ip Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 👪 Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name FELDEN, CHRISTIAN B 2590 GOLDEN GATE PARKWAY #101 82 Street Address (P.O. Box Number is Not Acceptable) NAPLES FL 33942 83 84 City Zip Code 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 Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition TITLE D DELETE 1.1 TOUR NAME **GOINS. HAROLD** 1.2 NAME R2E034 711 CHERRY BLOSSOM COURT STREET ADDRESS 1.3 STREET ADDRESS NAPLES FL 34120 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 217ITLE NAME **GOINS, SHEILA** 2.2 NAME STREET ADDRESS 711 CHERRY BLOSSOM COURT 2.3 STREE1 ADDRESS NAPLES FL 34120 CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition NAME GOINS, JASON 3.2 NAME 711 CHERRY BLOSSOM COURT STREET ADDRESS 3.3 STREET ADDRESS NAPLES FL 34120 CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME

14. Thereby 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.

6.3 STREET ADDRESS

6.4 City-St-ZIP

CICHATURE.

STREET ADDRESS CITY-ST-ZIP

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3-1-98

**FILED** 

Apr 03 1998 8:00am

Secretary of State