

FILED  
Jun 01 1998 8:00am  
Secretary of State

The seal of the State of Florida is a circular emblem. It features a central figure of a person standing on a small island, holding a bow and arrow. The figure is surrounded by a wreath. The outer ring of the seal contains the text "GREAT SEAL OF THE STATE OF FLORIDA" at the top and "IN GOD WE TRUST" at the bottom.

1. Corporation Name  
**FAM PAINTING, CORP.**

[illegible]

3. Date Incorporated or Qualified <b>11/25/1996</b>	
4. FEI Number <b>65-0711450</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

10. Name and Address of New Registered Agent

OPRZ MAURICIO  
s (P.O. Box Number is Not Acceptable)  
S.W. 5TH ST.  
R #6  
MI FL 85 Zip Code 33135

SIGNATURE [Signature] (NOTE: Registered Agent signature required when reinstating) DATE 03/26/18

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	MARTINEZ, FRANCISCO	1.2 NAME	LOPEZ, MAURICIO
STREET ADDRESS	15231 S.W. 80TH ST SUITE 314	1.3 STREET ADDRESS	1537 S.W. 5TH ST. APT W6
CITY-ST-ZIP	MIAMI FL 33193	1.4 CITY-ST-ZIP	MIAMI FL 33135
TITLE	PD	2.1 TITLE	PD
NAME	LOPEZ, MAURICIO	2.2 NAME	LOPEZ, ALVARO
STREET ADDRESS	15231 S.W. 80TH ST SUITE 314	2.3 STREET ADDRESS	1537 S.W. 5TH ST. APT W6
CITY-ST-ZIP	MIAMI FL 33193	2.4 CITY-ST-ZIP	MIAMI, FL 33135
TITLE	STD	3.1 TITLE	STD
NAME	LOPEZ, ALVARO	3.2 NAME	LOPEZ, OLGA
STREET ADDRESS	15231 S.W. 80TH ST SUITE 314	3.3 STREET ADDRESS	1537 S.W. 5TH ST. APT W6
CITY-ST-ZIP	MIAMI FL 33193	3.4 CITY-ST-ZIP	MIAMI, FL 33135
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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:  MAURICIO LOPEZ  
VICE PRESIDENT 04/15/98

CP2E034 (10/97)