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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700002632

1. Corporation Name

PAINTING & WALLPAPER, INC.

Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90066 018 ***150.00



Principal Place of Business	Maning Address					
29703 SW 158 CT. HOMESTEAD FL 33030	29703 SW 158 CT. HOMESTEAD FL 33030					
				DO NOT WRITE IN THIS SPACE	_	
				3. Date Incorporated or Qualifed		
				01/10/1997		
2. Principal Place of Business	2a. Mailing Address			4. FEI Number Applied For		
n	26			65-0720137 Not Applicab	le	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional		
22	27			5. Certificate of Status Besired Fee Required	_	
City & State	City & State -			6. Election Campaign Financing \$5.00 May Be		
3	28			Trust Fund Contribution Added to Fees		
Zip Country	Zip	Country		8. This corporation owes the current year Intangible		
25	29 30			Personal Property Tax. Yes No		
9. Name and Address of Co	urrent Registered Agent			10. Name and Address of New Registered Agent		
		81	Name			
RODRIGUEZ, ISRAEL 29703 SW 158 CT.		82	Street Address (P.O. Box Number is Not Acceptable)			
HOMESTEAD FL 33030		83				
		84	City	FL 85 Zip Code		
11. Pursuant to the provisions of Sections 607	7.0502 and 607.1508, Florida Statutes, the	e above	e-named corp	rporation submits this statement for the purpose of changing its registered	1	

agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: R	egistered Agent signature n	equired when reinstating) DATE	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12
TITLE	D DELETE	1.1 TITLE	☐ Change [Addition
NAME	RODRIGUEZ, ISRAEL	1.2 NAME		
STREET ADDRESS	29703 SW 158 CT.	1.3 STREET ADDRESS		
CITY-ST-ZIP	HOMESTEAD FL 33030	1.4 CITY-ST-ZIP		
TITLE	DELETE	2.1 TITLE	☐ Change 〔	Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		ĺ
CITY-ST-ZIP		2.4 CITY-ST-ZIP		
TITLE	☐ DELETE	3.1 TITLE	[Change [Addition
NAME		3.2 NAME		1
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE	☐ Change	Addition
NAME		4. 2 NAME	·	
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	☐ DELETE	5.1 TITLE	☐ Change [Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP	·	
TITLE	☐ DELETE	6.1 TITLE	☐ Change (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 of 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 or an attachment with an address, with all other like empowered.