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CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P9700006977 (7)

56 BB PAINTING & WATERPROOFING, INC.

Mailing Address
211 S.W. 51 AVENUE MIAMI FL 33134

FILED Apr 21 1998 8:00am Secretary of State



211 S.W. 51		211 S.W. 51 AVENUE				
MIAMI FL 331	134	MIAMI FL 33134		DO NOT WRITE IF	N THIS SPACE	
				3. Date Incorporated or Qualified		
				01/23/1997		
2. Principal P	lace of Business	2a, Mailing Address	***************************************	4, FEI Number	lAr	oplied For
21		26		65-673061		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			CO 75	Additional
2		27		5. Certificate of Status Desired		equired
City & State	6	City & State		6. Election Campaign Financing	\$5.00	May Be
3		28				to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid		
4	25	29	30	Personal Property Tax due June 3		No
<u> </u>	g, Name and Address of Cur		1401	10. Name and Address of New Regi		
VA	LDIVIESO, MANUEL ALFREDO) .IR	81 Name \	London T. Vala		
	1 S.W. 51 AVENUE	on.	<u> </u>	VICENTE T. NOIC	livie so	
T	.		82 Street Ad	dress (P.O. Box Number is Not Acceptable))	
MILE	AMI FL 33134		02			
			" M	11AMI PL 33/34		
			84 City		85 Zip	Code
					FL "	
11. Pursuant	to the provisions of Sections 607.0	0502 and 607 1508, Ft 8a Stati	utes, the above-named co	proporation submits this statement for the pur ration's board of directors. I hereby accept	rpose of changing it	ts registered
agent La	in iamiliauzinin, and accept lile oc	ligations of Section 60	li authorizad by the corpor. Norida Statutes.	ation's board of directors. Thereby accept	the appointment as	registereu
		> 1/ - ////	~			
TO A LATE OF	• / / /	/ // 8/9/ 5				
SIGNATURE	Bignature, typed or printed name of registered	agent and tille it applicable (NO	OTE: Registered Agent signature reg	juired when reinstating)	DATE	
		agent and tille it applicable (NO	DTE: Registerød Agent signature req	<u> </u>		RS IN 12
12.				quired when reinstating) ADDITIONS/CHANGES TO OFFICE		
12.	OFFICERS.	AND DIRECTORS DELETE	13.	<u> </u>	RS AND DIRECTOR	
12. HITLE NAME	OFFICERS. PT VALDIVIESO, MANUEL ALF	AND DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME	<u> </u>	RS AND DIRECTOR	
IZ. VITLE KAME STREET ADDRESS	PT VALDIVIESO, MANUEL ALF 211 S.W. 51 AVENUE	AND DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	<u> </u>	RS AND DIRECTOR	
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