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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000007597 (2)

CONCORD PAINTING INC.

Principal Place of Business

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE NAME

FILED Mar 04 1998 8:00am Secretary of State



Mailing Address 660 BROOKFIELD LOOP 660 BROOKFIELD LOOP LAKE MARY FL 32746 LAKE MARY FL 32746 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/01/1997 2. Principal Place of Business 2a, Mailing Address Applied For 21 59-3422792 26 Not Applicable Suite Ant # etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible 24 Yes □ No 25 30 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MARRERO, EDWIN 660 BROOKFIELD LOOP Street Address (P.O. Box Number is Not Acceptable) LAKE MARY FL 32748 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, typed or printed name of registered agent and title it applicable (NOTE Registered Agent signature required when reinstating) DATE PRESIDENT VICE RESIDENT SECTOR 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE 1.1 TITLE Change Addition EDWIN MARRONS NAME 1.2 NAME 660 Brookfield Loop STREET ADDRESS 1.3 STREET ADDRESS LAKE MARY, Pl. 32746 CITY-ST-7IP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE ☐ Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS OTTY-ST-ZW 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 41 TITLE Change ☐ Addition NAME 4 2 NAME STREET ADORESS 4.3 STREET ADDRESS

14. Thereby certify that the information emplied 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 of 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 confortion of the deciver or trustee expowered 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 my altachment with an address.

6.4 CITY - ST - ZIP

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

DELETE

1/8/90 (407) 324- 4627

Change

Change

Addition

☐ Addition

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SIGNATURE

12. TITLE EDWIN MARRERS NAME 12 NAME 660 BROOKFIELD LOOP STREET ADDRESS 1.3 STREET ADDRESS 1.4 CITY - \$1 - ZIP CITY-ST-ZIP 21 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADORESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-7IP

14. I hereby certify that the information exposed by with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certificated on this annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under officer or director of the conformation of the deciver or trustee encovered to execute this report as required by Chapter 607, Florida Statutes; and that my Block 12 or Block 13 if changed or on the attachment with an address.

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1/8/90 (40718