
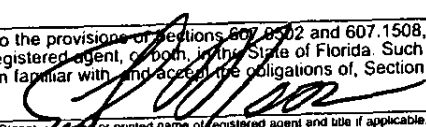


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED**  
**Sep 24, 1999 8:00 am**  
**Secretary of State**

09-24-1999 90001 003 \*\*\*150.00

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>				FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # P97000007597</b> ✓					
1. Corporation Name <b>CONCORD PAINTING INC.</b>					
Principal Place of Business <b>660 BROOKFIELD LOOP LAKE MARY FL 32746</b>			Mailing Address <b>660 BROOKFIELD LOOP LAKE MARY FL 32746</b>		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>01/01/1997</b>	
21		26		4. FEI Number <b>59-3422792</b>	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
City & State		City & State		8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	
23		28			
Zip	Country	Zip	Country		
24		29		30	
9. Name and Address of Current Registered Agent <b>MARRERO, EDWIN 660 BROOKFIELD LOOP LAKE MARY FL 32746</b>				10. Name and Address of New Registered Agent	
				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				FL	85 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  (NOTE: Registered Agent signature required when reinstating) DATE <b>4-15-99</b>					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition					
2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition					
3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition					
4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition					
5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition					
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
6.2 NAME					
6.3 STREET ADDRESS					
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, with all other like empowered.

SIGNATURE: 

Outtime Phone: #

**MARTIN P. SIMMONS, C.P.A.**

Member of the American Institute of Certified Public Accountants

226 Lakebreeze Circle  
Lake Mary, FL 32746  
(407) 321-7899  
Fax (407) 321-0487

September 14, 1999

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
P.O. BOX 6327  
TALLAHASSEE, FL 32314

Re: CONCORD PAINTING, INC.  
660 BROOKFIELD LOOP  
LAKE MARY, FL 32746

Dear SIRS;

Mt client received a 2<sup>nd</sup> NOTICE 1999 PROFIT CORPORATION ANNUAL REPORT Packet and brought it to my attention on 8/10/99. I checked his records and verified that the ANNUAL REPORT was indeed timely filed on 4/15/99. The corporate checkbook verified payment by check # 2601 for \$150.00 on 4/15/99. However, that check never cleared the bank. I called your office on 8/11/99 and was advised to submit a replacement check. Replacement check #2657 was issued on 8/11/99. Before stopping payment on # 2601, we waited for the September bank statement. As of today, check # 2601 has not cleared. We hereby submit a copy of the ANNUAL REPORT for 1999 with replacement check # 2657.

Thank you for your help and cooperation.

Sincerely,

  
Martin P. Simmons, C.P.A.