

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 12, 2001 8:00 am
Secretary of State

02-28-2001 90009 030 ***150.00

DOCUMENT # P97000007926

1. Entity Name

SANTIAGO PALOMARES PAINTING, INC.

Principal Place of Business

**333 E. LAFAYETTE STREET
 WINTER GARDEN FL 34787**

Mailing Address

**333 E. LAFAYETTE STREET
 WINTER GARDEN FL 34787**

2. Principal Place of Business

843 Park Valley Cir

Suite, Apt. #, etc.

3. Mailing Address

843 Park Valley Cir.

Suite, Apt. #, etc.

City & State

Clermont, Florida

Zip

34711

Country

Lake

City & State

Clermont Florida

Zip

34711

Country

Lake

4. FEI Number

59-3425485

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**PALOMARES, SANTIAGO
 333 E. LAFAYETTE STREET
 WINTER GARDEN FL 34787**

7. Name and Address of New Registered Agent

Name **Santiago Palomares**

Street Address (P.O. Box Number is Not Acceptable)

843 Park Valley Cir.

City **Clermont**

FL

Zip Code

34711

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Santiago Palomares

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

02-20-01

DATE

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
 NAME **PALOMARES, SANTIAGO**
 STREET ADDRESS **333 E. LAFAYETTE STREET**
 CITY-ST-ZIP **WINTER GARDEN FL 34787**

TITLE **Director** ☐ Delete
 NAME **Santiago Palomares**
 STREET ADDRESS **843 Park Valley Cir.**
 CITY-ST-ZIP **Clermont FL 34711**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Director** ☒ Change ☐ Addition
 NAME **Santiago Palomares**
 STREET ADDRESS **843 Park Valley Cir.**
 CITY-ST-ZIP **Clermont FL 34711**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Santiago Palomares

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-20-01

Date

Daytime Phone #

CR2004 (10/00)