## FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## FILED May 01, 2002 8:00 am Secretary of State

DOCUMENT # P970000 24504  1. Entity Name  Nicholson Painting Inc.							05-01-2002 91563 014 ***150.00			
DO NOT WRITE IN THIS SPACE							642897			
2. Principal Place of Business 2. Royal Palm > 3. Mailing Address 3. Mailing Address 3. Mailing Address 3. Suite, Apt. #, etc.					240	3	DO NOT WRITE IN THIS SPACE			
St Petersburg, FI			Mourtain Home AR			4.	FEI Number 59.343911	ib	Applied For  Not Applicable	
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	70	Country USA	プタルショ	Coun		5.	Certificate of Status Desired		75 Additional Required	
والمراجعة المراجعة ال						7. N	lame and Address of Curre			
DO NOT WOITE							Dana C. Wicholson, Jr			
DO NOT WRITE						Address (P.O.	Box Number is Not Accepta	ble)		
IN THIS SPACE					121	Roya	4 Palm Dri	ve 5		
						7		FL 3	DCode	
8. The above	e named entit	y submits this statement for	the purpose of changing its	registere	ed office o	r registered a	gent, or both, in the State of		2210.1	
SIGNATURE	Signature, typed	or printed name of registered agent an	id title if applicable. (NOTi	E: Registered	l Agent signa	ure required when	reinstating)	DATE		
9. This corp	oration is elig	ible to satisfy its Intangible	January 1 - M	ay 1 Fe	e is \$15	0.00	]			
Tax filing requirement and elects to do so. (See criteria on back)  After May 1, Fee is \$550.00  Amended UBR is \$61.25  Make Check Payable to Department of State							10. Election Campaign   Trust Fund Contribu		\$5.00 May Be Added to Fees	
11.		OFFICERS AND D			partition	t of otate				
NAME STREET ADDRESS CITY-SI-ZIP	Dana 1211 T	C Nichalson Royal Palm T			T ADDRESS				CR2E034B (12/01)	
TITLE	21.4	etersburg , FI	LOLEG	TITLE	ST-ZIP	. أي هند أحمَّه ا	<u> </u>			
NAME STREET ADDRESS CITY-ST-ZIP				name Stree	T ADDRESS ST-ZIP				CR2	
TITLE				TITLE	* .					
NAME STREET ADDRESS				NAMÉ STREE	TADDRESS :				1	
CITY-ST-ZIP					ST-ZIP	Section 1	- DO NOT	WRITE	1	
FITLE NAME				TITLE			IN THIS	SPACE		
STREET ADDRESS				NAME STREET	F ADDRESS			OI AOL		
CITY-ST-ZIP				CITY			La Company			
TITLE NAME				THILE	_			,		
STREET ADDRESS				NAME STREET	ADDRESS	•		3 "	er a	
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TITLE NAME				TITLE		• .	-			
STREET ADDRESS				NAME . STREET	ADDRESS		* .			
CITY-ST-ZIP				CITY-S					P. P. A. A.	
indicated	erury that the on this report	information supplied with the or supplemental report is tr	is filing does not qualify for ue and accurate and that m	the exem y signatu	ption state re shall ha	ed in Section in ave the same in	119.07(3)(i), Florida Statutes legal effect as if made under	I further certify that oath; that I am an o	t the information	

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 on an attachment with an address, with all other like empowered.

DANA C. Nichokan Jn.