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FILED
May 19 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000026389 (1)

1. Corporation Name
MCPOYLE'S PAINTING, INC.



Principal Place of Business
6362 MULLIN STREET
PALM BEACH GARDEN FL 33418

Mailing Address
6362 MULLIN STREET
PALM BEACH GARDEN FL 33418

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 3114 45th Street
Suite, Apt. #, etc.
22 Suite 1
City & State
23 West Palm Beach FL
Zip
24 33417 Country
25 Palm Beach

2a. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

3. Date Incorporated or Qualified

03/05/1997

4. FEI Number

05-0728004

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

Yes No

9. Name and Address of Current Registered Agent

GAVIN, FRANCIS W
6362 MULLIN STREET
PALM BEACH GARDENS FL 33418

10. Name and Address of New Registered Agent

81 Name MICHELLE MCPLOYE

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

4787 SABLE PINE CIRCLE C-1

83

84 City WEST PALM BEACH FL

85 Zip Code 33417

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 Michelle A. McPoyle

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

(NOTE: Registered Agent signature required when reinstating)

4-17-98

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
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CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CEO-PRESIDENT
1.2 NAME MICHELLE MCPLOYE
1.3 STREET ADDRESS 4787 Sable Pine Circle C-1
1.4 CITY-ST-ZIP West Palm Beach, FL 33417

Change Addition

2.1 TITLE Vice President
2.2 NAME Francis Gayin
2.3 STREET ADDRESS 6362 mullin st.
2.4 CITY-ST-ZIP Palm Beach Gardens, FL 33418

Change Addition

3.1 TITLE Vice President
3.2 NAME Cory McPoyle
3.3 STREET ADDRESS 220 Perry Ave
3.4 CITY-ST-ZIP Greenacres, FL 33463

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

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.

SIGNATURE Michelle A. McPoyle

4-17-98

544 575 2072

CR2E034 (10/97)