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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT # P97000027333 (8)

FILED Mar 13 1998 8:00am . Secretary of State

Principal Place 802 HEMLOCI APOPKA FL 3	CAL DECKS & COATINGS of Business K DRIVE)0027333 (8 , INC. Mailing Address 802 HEMLOCK DRIVE APOPKA FL 32712			19 11 10111 111 11 1111 1111 1111
		THE WALLES AND ABOUTED		DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified 04/01/1997	
~ `	ace of Business	2a, Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		Suite, Apt #, etc.		59-3435603	Not Applicable
Suite, Apr.	n, 010.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State)	City & State		6. Election Campaign Financing	\$5.00 May Be
Z _i p	Country	28 Zus	Country	Trust Fund Contribution	Added to Fees
] ² 'P	Country 25	Ζφ 29	30	This corporation owes or has paid the or Personal Property Tax due June 30.	urrent year Intangible X Yes No
	9. Name and Address of Curr		[00]	10. Name and Address of New Registered	
	OPKA FL 32712 to the provisions of Sections 607.08 egistered agent, or both, in the Sta	502 and 607 1508, Florida Stat te of Florida, Such change wa	84 City utes, the above-named core authorized by the corporations of the corporation of t	FI rporetion submits this statement for the purpose ation's board of directors. I hereby accept the ap	85 Zip Code of changing its registered
ayentia	п засным мил, месе мескере иле отп	iganions or, acciron coviloces, i			
SIGNATURE	Signature, typeol or present name of fugistored s		OTE Registered Agent signature requ		
2.		ejens and the if applicable (N	OTE Registered Agent signature requ		ID DIRECTORS IN 12
2 .	OFFICERS A	eperation the dapperation (Ne	OTE Registered Agent signature requ	uired whon reinstating) DATE	ID DIRECTORS IN 12
Z. Tle	OFFICERS A P LEMONS, MURRAY	ejens and the if applicable (N	OTE Registered Agent signature required. 13. 1.1 TITLE 1.2 NAME	uired whon reinstating) DATE	ID DIRECTORS IN 12
2. TLE AME TREET ADDRESS	OFFICERS A	ejens and the if applicable (N	OTE Registered Agent signature requ	uired whon reinstating) DATE	ID DIRECTORS IN 12
2. TLE AME TREET ADDRESS ITY-ST-ZIP TLE	P LEMONS, MURRAY 802 HEMLOCK DRIVE APOPKA FL 32712 ST	ejens and the if applicable (N	OTE Registered Agent signature required. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	uired whon reinstating) DATE	ND DIRECTORS IN 12 Change Addition
Z. TLE AME TREET ADDRESS TY-ST-ZIP TLE AME	P LEMONS, MURRAY 802 HEMLOCK DRIVE APOPKA FL 32712 ST LEMONS, WENDY L	representation applicable (N NO DIRECTORS DELETE	OTE Registered Agent signature required. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	uired whon reinstating) DATE	ND DIRECTORS IN 12 Change Addition
Z. TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS	P LEMONS, MURRAY 802 HEMLOCK DRIVE APOPKA FL 32712 ST	representation applicable (N NO DIRECTORS DELETE	OTE Registered Agent signature required. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	uired whon reinstating) DATE	ND DIRECTORS IN 12 Change Addition
2.	P LEMONS, MURRAY 802 HEMLOCK DRIVE APOPKA FL 32712 ST LEMONS, WENDY L 802 HEMLOCK DRIVE	representation applicable (N NO DIRECTORS DELETE	OTE Registered Agent signature required. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	uired whon reinstating) DATE	ND DIRECTORS IN 12 Change Addition Change Addition
2. ITLE AME TREET ADDRESS ITY-ST-ZIP TILE AME TREET ADDRESS TYY-ST-ZIP TILE AME	P LEMONS, MURRAY 802 HEMLOCK DRIVE APOPKA FL 32712 ST LEMONS, WENDY L 802 HEMLOCK DRIVE	REPORT OF THE PROPERTY OF T	OTE Registered Agent signature required. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-S1-ZIP	uired whon reinstating) DATE	ND DIRECTORS IN 12 Change Addition Change Addition
Z. THE MME REET ADDRESS IY-ST-ZIP TLE MME REET ADDRESS IY-ST-ZIP ILE MME REET ADDRESS REET ADDRESS	P LEMONS, MURRAY 802 HEMLOCK DRIVE APOPKA FL 32712 ST LEMONS, WENDY L 802 HEMLOCK DRIVE	REPORT OF THE PROPERTY OF T	OTE Registered Agent signature required. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	uired whon reinstating) DATE	ND DIRECTORS IN 12 Change Addition Change Addition
Z. TLE AME TREET ADDRESS TY-ST-ZIP TLE AME IREET ADDRESS TY-ST-ZIP TLE AME TY-ST-ZIP TLE AME IREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP	P LEMONS, MURRAY 802 HEMLOCK DRIVE APOPKA FL 32712 ST LEMONS, WENDY L 802 HEMLOCK DRIVE	REPORT OF THE PROPERTY OF T	OTE Registered Agent signature required. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-S1-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-S1-ZIP	uired whon reinstating) DATE	ND DIRECTORS IN 12 Change Addition Change Addition Change Addition
Z. TILE MME REET ADDRESS IY-ST-ZIP TLE MME REET ADDRESS IY-ST-ZIP ILE MME REET ADDRESS IY-ST-ZIP LE MME REET ADDRESS IY-ST-ZIP LE	P LEMONS, MURRAY 802 HEMLOCK DRIVE APOPKA FL 32712 ST LEMONS, WENDY L 802 HEMLOCK DRIVE	REPORT OF THE STATE OF THE STAT	OTE Registered Agent signature required. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	uired whon reinstating) DATE	ND DIRECTORS IN 12 Change Addition Change Addition Change Addition
2. TILE AME IREET ADDRESS TY-ST-ZIP TLE AME IREET ADDRESS TY-ST-ZIP TLE AME IREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE AME	P LEMONS, MURRAY 802 HEMLOCK DRIVE APOPKA FL 32712 ST LEMONS, WENDY L 802 HEMLOCK DRIVE	REPORT OF THE STATE OF THE STAT	OTE Registered Agent signature required. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	uired whon reinstating) DATE	ND DIRECTORS IN 12 Change Addition Change Addition Change Addition
REET ADDRESS IY-ST-ZIP ILE ME REET ADDRESS	P LEMONS, MURRAY 802 HEMLOCK DRIVE APOPKA FL 32712 ST LEMONS, WENDY L 802 HEMLOCK DRIVE	COMPANY COLORS (NO DELETE) DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-S1-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-S1-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	uired whon reinstating) DATE	ID DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
2. TILE AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP	P LEMONS, MURRAY 802 HEMLOCK DRIVE APOPKA FL 32712 ST LEMONS, WENDY L 802 HEMLOCK DRIVE	REPORT OF THE STATE OF THE STAT	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 34 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	uired whon reinstating) DATE	ID DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP LE MME ME M	P LEMONS, MURRAY 802 HEMLOCK DRIVE APOPKA FL 32712 ST LEMONS, WENDY L 802 HEMLOCK DRIVE	COMPANY COLORS (NO DELETE) DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	uired whon reinstating) DATE	ID DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
Z. TILE AME IREET ADDRESS TY-ST-ZIP TILE AME IREET ADDRESS	P LEMONS, MURRAY 802 HEMLOCK DRIVE APOPKA FL 32712 ST LEMONS, WENDY L 802 HEMLOCK DRIVE	COMPANY COLORS (NO DELETE) DELETE DELETE	OTE Registered Agent signature required. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	uired whon reinstating) DATE	ID DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
2. TILE AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP	P LEMONS, MURRAY 802 HEMLOCK DRIVE APOPKA FL 32712 ST LEMONS, WENDY L 802 HEMLOCK DRIVE	COMPANY COLORS (NO DELETE) DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	uired whon reinstating) DATE	DDIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition Addition
2. TILE AME TREET ADDRESS ITY-ST-ZIP TLE AME STREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE	P LEMONS, MURRAY 802 HEMLOCK DRIVE APOPKA FL 32712 ST LEMONS, WENDY L 802 HEMLOCK DRIVE	COMPANY CONTROL CONTRO	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-S1-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-S1-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	uired whon reinstating) DATE	DDIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition Addition
2. ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE	P LEMONS, MURRAY 802 HEMLOCK DRIVE APOPKA FL 32712 ST LEMONS, WENDY L 802 HEMLOCK DRIVE	COMPANY CONTROL CONTRO	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	uired whon reinstating) DATE	DDIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic 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 attactment with an address.

SIGNATURE:

Murray Lemons

3/8/95 (40)491-252