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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000027437

Country

9. Name and Address of Current Registered Agent

25

I AVEDV DAINTING IN

LAVERY PAINTING INC.

Principal Place of Business

Mailing Address

1616 31ST AVE VERO BEACH FL 32960

2. Principal Place of Business

LAVERY, STEPHEN

Suite, Apt. #, etc.

City & State

21

22

23

24

Zip

1616 31ST AVE VERO BEACH FL 32960

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90044 031 ***150.00



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	DO NOT	WRITE IN 1	THIS SPACE	
. Date Incorp. 03/26/199	orated or Qua	lifed		

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3.

4. FEI Number

59-3432245

5. Certifcate of Status Desired

Trust Fund Contribution

Personal Property Tax.

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

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

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VERO BEACH FL 32960			83									
									Teel 7:	Codo		
			84 (City				FL	85 Zij	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	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Begistered	Agent sk	nature re	quired when reinsta	tina)	±41	DATE				
12.	organization, types of printed views of			Active regard agreement required transfer agreement.								
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Country

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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:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/99 (561)778-4674

CR2E034 (11/98)