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

PROFIT CORPORATION ANNUAL REPORT

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000042558 (1)

RICK'S CUSTOM PAINT & BODY, INC.

## **FILED** Feb 09 1998 8:00am Secretary of State



| ,  |  |
|--|--|
| Principal Place of Business Mailing Address  |  |
| 11363 CARDIFF DRIVE 11363 CARDIFF DRIVE ORLANDO FL 32837 ORLANDO FL 32837  | DO NOT WRITE IN THIS SPACE   |
|  | 3. Date Incorporated or Qualified  |
|  | 05/12/1997   |
| Principal Place of Business     Address     Address  | 4. FELNumber Applied For   |
| 21 26  | Not Applicable   |
| Suite, Apt. #, etc. Suite, Apt. #, etc. 27   | 5. Certificate of Status Desired Security \$8.75 Additional Fee Required                 |
| City & State   | Election Campaign Financing \$5.00 May Be  |
| 23 28  | Trust Fund Contribution  |
| Zip Country Zip Country  | 8. This corporation owes or has paid the current year latengible                         |
| 24 25 29 30 9. Name and Address of Current Registered Agent  | Personal Property Tax due June 30.  Yes No  10. Name and Address of New Registered Agent |
| Orl Nove   | 10. Name and Address of New Registered Agent   |
| PHIMAN, RICHARD L  |  |
| 11363 CARDIFF DRIVE ORLANDO FL 32837 82 Street Addres  | ss (P.O. Box Number is Not Acceptable)   |
| 83   |  |
| <b>84</b> Clty   | FL 85 Zip Code   |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corpor   | <u>- —   ,                                 </u>  |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corpor office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | n's board of directors. I hereby accept the appointment as registered                    |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required   | when reinstating) DATE   |
| 12. OFFICERS AND DIRECTORS 13.   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  |
| TITLE D DELETE 1.1 TITLE   | Change Addition  |
| NAME PITTMAN, RICHARD L 1.2 NAME   |  |
| STREET ADDRESS 11363 CARDIFF DRIVE 1.3 STREET ADDRESS  |  |
| CITY-ST-ZIP ORLANDO FL 32837 14 CITY-ST-ZIP  |  |
| TITLE D DELETE 2.1 TITLE   | ☐ Change ☐ Addition  |
| NAME PITTMAN, DONNA R 22 NAME  |  |
| STREET ADDRESS 11363 CARDIFF DRIVE 2.3 STREET ADDRESS  |  |
| CITY-ST-ZIP ORLANDO FL 32837 2. 4 CITY-ST-ZIP  |  |
| TITLE DELETE 3.1 TITLE   | ☐ Change ☐ Addition  |
| NAME 3.2 NAME  |  |
| STREET ADDRESS 3.3 STREET ADDRESS  |  |
| CITY-ST-ZIP 3.4. CITY-ST-ZIP   |  |
| TITLE DELETE 4.1 TITLE   | Change Addition  |
| NAME 4. 2 NAME   |  |
| STREET ADDRESS 4.3 STREET ADDRESS  |  |
| City-St-ZiP 4.4 City-St-ZiP  |  |
| TITLE DELETE 5.1 TITLE   | Change Addition  |
| NAME 5.2 NAME  |  |
| STREET ADDRESS 5.3 STREET ADDRESS  |  |
| CITY-ST-ZIP 5.4 CITY-ST-ZIP  |  |
| TITLE DELETE 6.1 TITLE   | Change Addition  |
| NAME 6.2 NAME  |  |
| STREET ADDRESS 6.3 STREET ADDRESS  |  |
| CITY-ST-ZIP 6.4 CITY-ST-ZIP  |  |
| 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Se indicated on this annual report or supplemental annual report is true and accurate and that my signature   | ection 119.07(3)(i), Florida Statutes. I further certify that the information            |

te and that my signature shall have the same legal effect as in hidde a low oam, and cute this report as required by Chapter 607, Florida Statutes; and that my name appears in AFFER 2,00 PM

SIGNATURE:

407 8518774