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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000044480 (6)

FILED
May 18 1998 8:00am
Secretary of State

PARADISE PAINTING OF WESTERN FLORIDA, INC. Principal Place of Business Mailing Address 8927 GRANDE VISTA WAY 6927 GRANDE VISTA WAY SOUTH PASADENA FL 33707-4702 SOUTH PASADENA FL 33707-4702 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/16/1997 2. Principal Place of Business 2a. Mailing Address Applied For 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 61 BUEKER, CHARLES A 6927 GRANDE VISTA WAY 82 Street Address (P.O. Box Number is Not Acceptable) SOUTH PASADENA FL 33707-4702 83 84 City Zip 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, typod or ported name of registered agent and like if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OWNER DELETE Change 1 1 TITLE TITLE CHARLES A. BUEKER NAME 1.2 NAME 6927 GRANDE VISTA WAY SO. STREET ADDRESS 13 STREET ADDRESS SO. PASADENA, FL. 33707 CITY-ST-ZIP 1.4 C/TY - ST - 7/P Change Addition 2.1 TITLE TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - S1 - ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CHTY-ST-ZIP TITLE DELETE 4.1 THILE Change Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 62 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 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 eath; 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.

CICNATURE Charles O Ruck C

RIFFER 4/2/00 RIS.384-494