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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000061452 (3)

TJ POOL PLASTERING, INC.

ERING, INC.

**FILED** 

Apr 30 1998 8:00am

Secretary of State

1089 CALANDA AVE 1069 CALANDA AVE ORLANDO FL 32807 ORLANDO FL 32907 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/16/1997 Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 21 26 59 3458370 Not Applicable Suite, Apl. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country  $Z_{\rm ID}$ Country 8. This corporation owes or has paid the current year Intangible 24 25 Yes 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Thurman, tony 1069 CALANDA AVE 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32807 83 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 noth, 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 posted cominate registered agent and title diagraticable (NOT). Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change Addition THURMAN, TONY NAME 1.2 NAME 1069 CALANDA AVE STREET ADDRESS 13 STREET ADDRESS ORLANDO FL 32807 CITY-ST-ZIP 1.4 CITY - ST - ZIP TITLE DELETE 2.1 THLF Change Addition STODOLA, JOSEPH NAME 2.2 NAME **2879 S CONWAY RD APT 151** STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL 32812 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE ☐ Change Addition NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELE1E TITLE 4 1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP DELETE TITLE 5.1 TITLE ■ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS **600002506296** -04/30/98--01019--024<sup>10</sup> CITY - ST - ZIP 5.4 CITY - ST- ZIP TITLE DELETE 6.1 TITLE NAME 6.2 NAME \*\*\*150.00 STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 6.4 CHY-ST-ZIP

14. Thereby 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.