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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000061733 (6)

EASY ROLLING PAINT SERVICE, INC.

FILED May 13 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 1361 LAWNDALE RD 1381 LAWNDALE RD TALLAHASSEE FL 32311 TALLAHASSEE FL 32311 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/1<u>6/19</u>97 2. Principal Place of Business 2a. Mailing Address Applied For 462068 21 Not Applicable 26 Suite, Apt. #, etc. Suite. Apt #. etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 29 30 Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 GEDEON, SCOTT Name 1361 LAWNDALE RD. 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32311 63 84 City Zip Code 11. Pursuant to the provisions of Sections 607.05.02 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: typoid or printed name of registered agent and the if applicable (NOTE: Registered Agent a gnature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change ___ Addition TITLE 1.1 TITLE GEDEON, SCOTT NAME 1.2 NAME 1361 LAWNDALE RD. STREET ADDRESS 1.3 STREET ADDRESS TALLAHASSEE FL 32311 CITY-ST-ZiP 1.4 CiTY - ST- ZIP TITLE DELETE 2.1 TITLE ☐ Change ☐ Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE ☐ Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY ST ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADORESS 6.3 STREET ADDRESS CITY-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 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 13 if changed, or on an attact ment with an address.

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SIGNATURE: ACAT Sed-

4/19/98 (800)877-3546