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

PROFIT **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #

P97000076534 (1)

EDUARDO WALLPAPER & PAINTING, INC.

Principal Place of Business

Mailing Address

2020 FORESTHUL BLVD #108

2920 FORESTHILL BLVD. #108

FILED Mar 31 1998 8:00am Secretary of State



CORAL SPRINGS FL 33065			CORAL SPRINGS FL 33065		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifie	d		
					09/04/1997			
	lace of Business	2a. Mailing Address	11 1 H	1 1	4. FEI Number			Applied For
21 COVER	Springs - Ft. have		474 3	ud.	W-077736	3		Not Applicable
Suite, Apt.	Suite, Apt. #, etc.				5. Certificate of Status Desired			75 Additional e Required
City & State City & State					6. Election Campaign Financing		7	00 May Be
23	a spras	28		<i>y</i>	Trust Fund Contribution			led to Fees
Z4 Zio 24 ZZ. 3	3065 25 Broake		Country 5	word	This corporation owes or has Personal Property Tax due Ju	ine 30. 🛚 🗀	Yes	r Intangible
	g. Name and Address of C	urrent Registered Agent			10. Name and Address of New	Registered A	lgent	
AVILES, EDUARDO				81 Name				
				82 Street Address (P.O. Box Number is Not Acceptable)				
CORAL SPRINGS FIL 39065				83				
	1)		84	City			85	Zip Code
	_ 1			· •		FL		
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 agept. A 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 adout the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	Signature, typing or printer name of directer	ed agent and title (Lapplicable (NOTE: R	legistered Age	nt signature require	ed when reinstating)	DATE		
12.		S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OF	FICERS AND		
TITLE		☐ DELETÉ	1.1 TITLE				Char	nge 🔲 Addition
NAME	Eduardotto	Hici 8601 #108	1.2 NAME		/			
STREET ADDRESS	\$920 Fores	77.00	1.3 STREET	ADDRES\$	/			+
CITY-ST-ZIP	Coul desur	10 Fr 33066	1.4 CITY - S	T-ZIP				
TITLE	•	T DELETE	2.1 TITLE		1		Char	nge 🔲 Addition
NAME	1		2.2 NAME					
STREET ADDRESS	1		2.3 STREET	ļ				1
CITY+ST-ZIP	-	DELETE	2. 4 CITY - S	ST-ZIP			Char	nge Addition
TITLE		C) percie	3.1 TITLE		\			inge C Modillon
NAME			3.2 NAME	1000000	1			
STREET ADDRESS			3.3 STREET		1			
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - 5 4.1 TITLE	51-ZIP			Char	nge
NAME		Description of the second	4. 2 NAME	1	11			
STREET ADDRESS			4.3 STREET	ADDRESS	Ì	1		
CITY-ST-ZIP			4.4 CITY - S		\	1		
TITLE		DELETE	5.1 TITLE	1-211			Char	nge Addition
NAME			5.2 NAME		1		•	
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY - S					
TITLE		DELETE	6.1 TITLE				☐ Char	nge 🔲 Addition
NAME		N I	6.2 NAME		!			
STREET ADDRESS		\\	6.3 STREET	ADDRESS				
CITY-ST-ZIP		~ 1	6.4 CITY - S					
		/ 			A 0 1 1 A A A A A A A A A A A A A A A A	4.6		

I hereby certify that the information supplied will indicated on this annual report or supplied in a officer or director of the corporation or the reposition of the corporation or the reposition of the corporation of the reposition of the reposit this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information under large and that my signature shall have the same legal effect as if made under oath, that I am an an only of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in the property of t