Apr 25, 1999 8:00 am Secretary of State

04-25-1999 90051 023 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000076534

1. Corporation Name

EDUARDO WALLPAPER & PAINTING, INC.

| Principal Place  | e of Business  | Mailing Address   |   |  |  | 1 10010 01101 01100                            | 11531 8483 1883   |
|--|--|---|---|--|--|--|-------------------|
| CORAL SPRING   | S - FT LAUDERDALE  | 2920 FOREST HILL BLVD   |   |  |  |  |                   |
| APT 108  |  | APT 108   |   |  |  |  |                   |
| CORAL SPRING   | S FL 33065   | CORAL SPRINGS FL 33065  |   |  | DO NOT WRITE IN THIS SPACE   |  |                   |
| US US  |  |   |   |  | 3. Date Incorporated or Qualifed 09/04/1997  | ·  |                   |
| 2. Principal Pl  | lace of Business   | 2a. Mailing Address   |   |  | 4. FEI Number  | App  | olied For         |
| 21   |  | 26  | 26  |  | 65-0779563   | Not  | Applicable        |
| Suite, Apt. #, etc.  |  | Suite, Apt. #, etc.   | 27  |  | 5. Certificate of Status Desired   | ficate of Status Desired                       |                   |
| City & State   | e  | City & State  |   |  | 6. Election Campaign Financing   | \$5.00   | Mav Be            |
| 23   |  | 28  |   |  | Trust Fund Contribution  | Added to                                       | o Fees            |
| Zip  | Country  | Zip   | Country   | у  | 8. This corporation owes the current year I  | ntangible                                      |                   |
| 24   | 25   | 29  | 30  |  | Personal Property Tax.   |  | □No               |
| <del> </del>   | 9. Name and Address of Curre   | nt Registered Agent   |   |  | 10. Name and Address of New Registere  | d Agent  |                   |
|  |  |   | 81  | 1 Name   |  |  |                   |
| AVIL   | es, eduardo  |   |   | 2 0 111  | (D.O. D Number id Net Assessed   | <del> </del>                                   |                   |
| 2920   | FORESTHILL BLVD. ≠10/8   |   | 82  | 2 Street Addre   | ess (P.O. Box Number is Not Acceptable)  |  | . ,               |
| COR  | AL SPRINGS FL 3306\$   |   | 83  | 3  |  | 1.1  |                   |
|  | 1 1  | ~   |   |  |  |  |                   |
|  | 1/   |   | 84  | 4 City   | F  | L 85 Zip C                                     | Code              |
| 11 Pursuant  | to the provisions of Sections 607.05   | 02 and 607,1508. Florida Statute  | s, the abov   | ve-named corpo   | oration submits this statement for the purpose   | of changing its                                | registered        |
| office or r  | egistered agent, or doth in the State  | of Florida. Such change was au  | thorized by   | y the corporation  | oration submits this statement for the purpose on's board of directors. I hereby accept the app  | ointment as reg                                | gistered          |
|  |  |   | ida Statute   | ·5.  | J.   | //ac   |                   |
| SIGNATURE  | Signature typed or printed name of registered ag   | ent and title if applicable (NOTE:  | Registered Ans  | ent signature required   | d when reinstation) DAME   | <u> ( 7 1                                 </u> |                   |
| 12.  | OFFICERS A   | ND DIRECTORS  | 13.   |  | ADDITIONS/CHANGES TO OFFICERS  | AND DIRECTO                                    | RS IN 12          |
| TITLE  | P  | DELETE  | 1.1 TITLE   |  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,   | Change   | Addition          |
| NAME   | AVILES, EDUARDO  | <del></del>   | 1.2 NAME  | .  |  |  |                   |
| STREET ADDRESS   | 2920 FOREST HILL ELVDS., #   | ¥108  |   | ET ADDRESS   |  |  |                   |
| (  | CORAL SPRINGS FL 33068   | ,,,,  | 1.4 CITY-   | Į  |  |  | -                 |
| CITY-ST-ZIP  | CONAL SPRINGS I EJSSOOS  |   |   |  |  |  |                   |
| TITLE  |  |   |   |  |  | ☐ Change                                       | ☐ Addition        |
| NAME   |  | ☐ DELETE  | 2.1 TITLE   | i  |  | Change   | ☐ Addition        |
|  |  | ☐ DELE≀E  | 2.2 NAME  | :  |  | ☐ Change                                       | Addition          |
| STREET ADDRESS   | and a surface the surface of the sur | UELETE با المحاصلية | 22 NAME<br>23 STREE   | ET ADDRESS   | e agreement a service of the service | ☐ Change                                       | Addition          |
| CITY-ST-ZIP  | ng ang al-sandigaggangganggan dimenanakan santa.   | ر به احداث میں بعد سنی تشکیت رین.<br>استان استان میں استان تشکیت رین  | 2.2 NAME<br>2.3 STREE<br>2.4 CITY-  | ET ADDRESS   | و المحمد  |  |                   |
| CITY-ST-ZIP  | ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )  | ☐ DELETE  | 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE  | ET ADDRESS   | و المائيس سيدي و المائيس سيدي و المائيس سيدي   | ☐ Change                                       | ☐ Addition        |
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SIGNATURE: ゴ

CITY-ST-ZIP

ure required

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 of supplied and a courage 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 12 or Block 13 if changed, or on any attachment with an address, with all other like empowered.

Daytime Phone #