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

~FROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

OCUMENT # 197000080151

orporation Name

Wise Painting Inc.

00 FEB - 4 (M 8:29

SECRETALIANS SEE FLORIDA

	<i>_</i>								
•	e of Business	Mailing	Address						
3821	Arthur st		_						
CT A	st. Augusting , FC SAIMP					DO NOT WRITE IN THIS SPACE			
J. 174						3. Date Incorporated or Qualifed			
	32095					3. Date incorporated or	9/15/97		
. Principal P	lace of Business	2a. Ma	iling Address			4. FEI Number		Ar	plied For
		26	_			59-34716	90	No	t Applicable
Suite, Apt.	#, etc.		te, Apt. #, etc.					\$8.75	Additional
1		27				5. Certifcate of Status D	esired	Fee Re	equired
City & Stat	e	City	& State			6. Election Campaign Financing \$5.00 May Be			
		28				Trust Fund Contribution Added to Fees			
Zip	Country	Zip		Cou	ıntry	8. This corporation owe	the current year Ir	ntangible	_
i :	25	29		30		Personal Property Ta	x	Yes	□No _
	9. Name and Address of Cur	rrent Registere	d Agent			10. Name and Address	of New Registered	d Agent	
					81 Name	Tee Wice			
					82 Street Add	Iress (P.O. Box Number is No	t Acceptable)		
					3	ress (P.O. Box Number is No.	57		
•					83	•			
					94 64			DE Zin /	Code
`					84 City 7	Augustine	FI		Code 2095
i. Pursuant	to the provisions of Sections 607.	0502 and 607.15	508, Florida Stat	tutes, the a	hove-named corr	poration submits this stateme	nt for the purpose of	of changing its	registered
office or n	egistered agent, or both, in the St m familiar with, and accept the ob	ate of Florida. S	uch change was	s authorized	d by the corporat	ion's board of directors. I here	by accept the appo	ointment as re	gistered
U				ionaa otat	ates.		1-31	. 00	
::-KIA I LIPE	Signature, bysec or project name of registered	agent and title if appli	cable. (NC	TE: Registered	Agent signature requir	ed when reinstating)	/ ~ 3 (DATE		
<u> </u>		AND DIRECTO		13.		ADDITIONS/CHANGE	S TO OFFICERS A	ND DIRECTO	RS IN 12
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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 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 an attachment with an address, with all other like empowered.

1-31-00

WISE PAINTING, INC.

DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE,FL 32314-6327

RE: REINSTATEMENT

DEAR SIRS,

PLEASE FIND ATTACHED THE APPLICATION FOR REINSTATEMENT OF MY CORPORATION. WE NORMALLY DO A GOOD JOB WITH ANY PAPERWORK THAT WE RECEIVE, BUT UNFORTUNATELY, WE DO NOT SHOW OUR RECORDS AS HAVING RECEIVED THE CORPORATE ANNUAL REPORT, AND HENCE, WE DID NOT FILE IT IN A TIMELY MANNER, THEREBY CAUSING THE ATTACHED APPLICATION FOR REINSTATEMENT. SINCE WE DID NOT RECEIVE THE FORM, AND WE ARE IN DIRE STRAIGHTS FINANCIALLY, WE HEREBY ASK THAT YOU ALLOW US TO PAY THE ORIGIONAL FEE OF \$150. THANK YOU FOR YOUR CONSIDERATION IN THIS MANNER.

CORDIALLY,

JOE WISE

PRESIDENT/OWNER

WISE PAINTING, INC. ----

p.s. we did not recieve A form for this years yet, so, please find one that we "Dummyed Up!" Thanks

Toe