SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Mailing Address

PALM BAY FL 32907

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

27

29

911 FOREST STREET NORTHEAST

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

PALM BAY FL 32907

21

22

23

24

Zip

SIGNATURE

12.

TITLE

TITLE

TITLE

TITLE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

911 FOREST STREET NORTHEAST

2. Principal Place of Business

DAVIS, RONALD

PALM BAY FL 32907

Suite, Apt. #, etc.

City & State

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

Country

R1 Name

82

Pursuant to the provisions of sections 607.0502 and 607.1508, Fiorida 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.

City

(NOTE: Registered Agent signature required when reinstating)

30

DOCUMENT# P97000084046 (6) FLYING COLORS PAINTING, INC.

Country

9. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

25

911 FOREST STREET NORTHEAST

CR2E034 (5/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 1.1 TITLE DELETE Change L Addition NAME JENNINGS, THOMAS M 1.2 NAME 248 VERSAILLES DRIVE 370 E. Rivera Bluck 1.3 STREET ADDRESS STREET ADDRESS **MELBOURNE BEACH FL 32951** Indialantic F1. 329 CITY-ST-ZIP 1.4 CITY-ST-ZIP 2.1 TITLE DELETE DAVIS, RONALD NAME 2.2 NAME STREET ADDRESS 911 FOREST STREET NORTHEAST 2.3 STREET ADDRESS PALM BAY FL 32907 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE 4.1 TITLE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIF 4.4 CITY-ST-ZIP 5.1 TITLE DELETE ___ Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE 6.1 TITLE DELETE **80000260299**6 -07/30/93--01071--043 NAME 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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 to 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 to 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 that I am a state 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 that I am a state of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes.

FILED Jul 28 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

8. This corporation owes or has paid the current year intengible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Zip Code

Yes

85

Not Applicable

3. Date Incorporated or Qualified

5. Certificate of Status Desired

6. Election Campaign Financing

***150.00

Trust Fund Contribution

Street Address (P.O. Box Number is Not Acceptable)

6**5-**0784845

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

09/29/1997

FLYING COLORS PAINTING INC. 911 FOREST STREET N.E. PALM BAY, FLORIDA 32907 407-725-2805

July 16, 1998

Florida Dept. of State Division of Corporation Annual Report Filing PO Box 1500 Tallahassee, FI 32302-1500

To Whom it May Concern,

I have to start by apologizing for the lateness of this money, but unfortunately I had no idea that this was to be done. My office had received only one mailing from your office and at that time we were already late. I had called your office and explained that we are a very small corporation (2 men) and we just started in September so we did not know or look for any paper work from you. We were told to enclose a check for \$150.00 and this letter. We will however look for the letter in January so I don't have this problem again. My partner and I are trying to do everything possible to follow all reports and licensing. Thank You for your understanding in this matter.

Yours Truly

Thomas Jennin

President \