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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P97000085311 (3)

C.V.F. PAINTING, INC.

FILED
May 01 1998 8:00am
Secretary of State

|--|

Principal Place of Business Mailing Address			- 1 10E11001 110 TOTAL 100H 00H 00H 00H 00H 00H 00H 1500 1100 11			
1537 INDIAN SUMMER LANE 1537 INDIAN SUMMER LANE ORLANDO FL 32825 ORLANDO FL 32825		LANE				
ORLANDO FL 32825 ORLANDO FL 32825					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					10/01/1997	
2. Principal Place of Business	2a. Mailing Address	ailing Address			4. FEI Number Applied For	
21	26				<b>59 3970520</b> Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required	
22 City & State	City & State				~ <del></del>	
23				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip Country	Zip	Cou	Country		8. This corporation owes or has paid the current year Intangible	
24 25	29	30	•		Personal Property Tax due June 30. Yes No	
9. Name and Address of Current F		1 <del></del>			10. Name and Address of New Registered Agent	
HEIM, DENNIS M			81	Name		
1537 INDIAN SUMMER LANE			82	Street Add	iress (P.O. Box Number is Not Acceptable)	
ORLANDO FL 32825						
			83			
•			84	City	85 Zip Code	
				·	<b>                   -   </b>	
office or registered agent, or both, in the State of	Florida, Such change was	authorized	d by	the corporat	poration submits this statement for the purpose of changing its registered tion'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, typed or printed name of registered agent a			d Age	nt signature requi	ored when reinstating) DATE	
TITLE OFFICERS AND I	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
LE DE UNIS M. HE/M DELETE LITTI				☐ Change ☐ Addition		
TILLAN SUMMER FOR			AME		•	
				ADDRESS		
TITLE CITY-ST-ZIP CA A A NO FI SA SA SA	DELETE	1,4 CI 2.1 Ti		i - ZIP	Change Addition	
NAME		2,2 NAM		1	C comple	
STREET ADDRESS				ADDRESS		
CITY-ST-ZIP	<u> </u>			T-ZIP		
TITLE	DELETE	3.1 TITLE		1-11	Change Addition	
NAME		3 2 N/		1		
STREET ADDRESS				ADDRESS		
CITY-ST-ZIP				1 - 7IP		
TITLE	DELETE	4.1 TI			☐ Change ☐ Addition	
NAME		4.2 N	AMÉ	1		
STREET ADDRESS		4.3 \$1	REET	ADDRESS		
CITY-ST-ZIP		4.4 CI	TY-SI	(- ZIP		
TITLE	DELETE	5.1 10	116		Change Addition	
NAME		5.2 NA	ME			
STREET ADDRESS		5.3 ST	REET	ADDRESS		
CITY-ST-ZIP		5.4 CI	TY-ST	- ZIP		
TITLE	☐ DELETE	6.1 Til	TL <del>E</del>		☐ Change ☐ Addition	
NAME		62 NA	AME		1	
STREET ADDRESS		6 3 ST	REET	ADDRESS		
CITY-ST-ZIP	ALTERIA	64 CI			Section 110 07(2V) Elevide Statutes Lituther certify that the information	

• I nereby 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 suppliemental 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.

SIGNATURE:

Dennis ha Heim

4-27-98

407-281-801