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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000094234 (6)

ALKA PAINTING CO., INC.

Principal Place of Business

Mailing Address

FILED Apr 01 1998 8:00am Secretary of State



4371 50TH STREET SOUTH 4371 50TH STREET SOUTH ST. PETERSBURG FL 33711 ST. PETERSBURG FL 33711 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/31/1997 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zio Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes **M** No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 LESZCZYNSKI, DANUTA 4371 50TH STREET SOUTH 82 Street Address (P.O. Box Number is Not Acceptable) ST. PETERSBURG FL 33711 83 84 City 85 Zip Code 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 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. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ZE034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE ☐ Addition TITLE 1.1 TITLE ☐ Change LESZCZYNSKI, ZIBIGNIEW NAME 1.2 NAME 4371 50TH STREET SOUTH 1.3 STREET ADDRESS STREET ADDRESS ST. PETERSBURG FL 33711 1.4 CITY-ST-ZIP CITY-ST-ZIP V. r. DELETE Change Addition 2.1 TITLE TITLE THOMUS, MARK NAME 2.2 NAME L'ANE HILL LY STREET ADDRESS 2.3 STREET ADDRESS Tu 34641 CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Aggre TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETÉ ☐ Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby 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.