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PROFIT **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **P97000105051**1. Corporation Name

REGENCY PAINT AND BODY INC.

TIEGENOT TAINT AND DOD	1 1110					
Principal Place of Business	Mailing Address		7.2	3 1005:1005 11 3 :0411 10014 0 4 131 05 311	90101 15011 00101 01511 5010	I O O O O O O O O O O O O O O O O O O O
11701 MINTO CT.	7 11701 MINTO CT.					
ORLANDO FL 32837	ORLANDO FL 32837					
					IN THIS SPACE	• • •
				3. Date Incorporated or Qualifed 12/15/1997		
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Ar	oplied For
21	26			59-3481388	— — -	ot Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.					Additional
22	27			3. Certificate of Status Desired	Fee Re	equired
City & State	City & State			6. Election Campaign Financing		May Be
Zip Country		Country		Trust Fund Contribution	Added	to Fees
24 25	29	30	y	This corporation owes the curren Personal Property Tax.	t year Intangible Yes	□No
	of Current Registered Agent	130		10. Name and Address of New Reg		,
	Land Carlot Williams	81	Name		,	
RAMSAMMY, SUCIL		82	Street Adv	dress (P.O. Box Number is Not Acceptable	•	
11701 MINTO CT.	NyC.	02	Sueet Aut	dress (F.O. box number is not Acceptable	*) ,	
ORLANDO FL 32837		83	3	"快速"等。3.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1		4 5 4 16
	•	84	City	- 18 18 18 18 18 18 18 18 18 18 18 18 18	85 Zip	Code
	San	"	City		FL s Z P	Code
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office of registered agent, or both, in tagent. I am familiar with, and accept to SIGNATURE Signature, typed or printed name of recognition. 12. OFFICE	the State of Florida. Such change was a the obligations of, Section 607.0505, Flo egistered agent and title if applicable. (NOTI CERS AND DIRECTORS	authorized by orida Statutes E: Registered Ager	the corporat	lion's board of directors. I hereby accept t	DATE DATE DERS AND DIRECTO	gistered PRS IN 12
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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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: .