2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P98000010942 1. Entity Name 'S &: S PAINTING AND TEXTURES, INC.						FILED Mar 13, 2002 8:00 am Secretary of State 03-13-2002 90015 037 ***150.00			
Principal Place of Business 791 SW GENERAL PATTON TERRACE PORT ST. LUCIE FL 34953		Mailing Address 791 SW GENERAL PATTON TERRACE PORT ST. LUCIE FL 34953							
2. Principal Pl 822 S₩ Suite, Apt	lace of Business McCullough Avenue # etc	3. Mailing Address 822 SW McCu1 Suite, Apt. #, etc.	lough	Avenue		DO NOT WRITE IN		UILIU 1101 IUU1	
City & State		City & State Port St. Luc	ie. FL		4. F	El Number 65-0811055		oplied For ot Applicable	
34953	Country St. Lucie	^{Zip} 34953	Countr	Lucie	5. 0	Certificate of Status Desired	\$8.75 Add		
	6. Name and Address of Curre					ame and Address of New Regist			
				David					
	HIHLEY D GENERAL PATTON TERRACE LUCIE FL 34953			Street Addres 822 SW	Address (P.O. Box Number is Not Acceptable) 2 SW McCullough Avenue				
FUNI SI.	LUCIE FL 34933			City Port S			FL 3495		1
8. The above	named entity submits this statement	for the purpose of changing it	s registere	d office or regis	tered ag	ent, or both, in the State of Florida.	<u> </u>	<u> </u>	1
SIGNATURE _	David M. Sullivan, Signature, typed or printed name of registered age	President	TE: Registered	Agent signature requ		2/	19/02		
Tax filing r	pration is eligible to satisfy its Intangil requirement and elects to do so. ria on back)	After May 1, 2	002 Fee v	/ili be \$550.00	tate	10. Election Campaign Financir Trust Fund Contribution.	Addee	0 May Be d to Fees	1
11.			12.			DITIONS/CHANGES TO OFFICER	S AND DIRECTOR	S IN 11	Ê
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Sullivan, David M 791 SW General Patton TI Port Saint Lucie FL 34953	ERR. PSL				President/Secretary A Change		CH2E034 (9) (0	
title Name Street address	ST Heines, Shirley D 791 SW General Patton Ti	[⊠] Delete ER.		T ADDRESS			Change	Addition	5
CITY-ST-ZIP TITLE	VP	Delete *	TITLE	ST-ZIP			Change	Addition	ľ
NAME Street address City-st-zip	791 SW GENERAL PATTON TERRACE			T ADDRESS ST - ZIP	822 S	W McCullough Avenu	e		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	1	T ADDRESS ST- ZIP			Change	Addition	
		Delete		T ADDRESS ST- ZIP			Change	Addition	1
TITLE NAME Street Address City-St-Zip							Change	Addition	l
NAME		Delete		T ADDRESS ST-ZIP					
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 13. hereby	certify that the information supplied v I on this report or supplemental repor poration or the receiver or trustee er , or on an attachment with an address	vith this filling does not qualify	NAME STREE CITY-	T ADDRESS ST-ZIP			her certify that the	information	