Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90029 027 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000027262

Corporation Name

TITLE

NAME

STREET ADDRESS

V & T P/	ainting and waterprod	OFING, INC.						
Principal Place	e of Business	Mailing Address			I (MATI) AND I (III INII) ENTITI ANDIII ANDIII ANDIII	(11 44 011 441 11 6 11		alită ilai (86)
929 SW 136 PLACE 929 SW 136 PLACE MIAMI FL 33184 MIAMI FL 33184					DO NOT WRI	TE IN THIS :	SPACE	
					3. Date Incorporated or Qualifed	· · · · · · · · · · · · · · · · · · ·		
				03/24/1998				
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Apr	plied For
21	26				65-08314	51	No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			-,-			П	\$8.75 A	Additional
27					5. Certifcate of Status Desired	ш	Fee Re	quired
- City & State City & State					- e. Election Campaign Financing		==\$5 :0 0-	May Be
28					Trust Fund Contribution		Added to	o Fees
Zip	Country Zip Co			,	8. This corporation owes the curr	ent year Inta	ingible	1
24	25 29 30				Personal Property Tax.			□No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New F	Registered /	Agent	
			81	Name	•			
VERGARA, ESTEBAN 750 NW 13 STREET				Street Add	ress (P.O. Box Number is Not Accepta	able)		
				01.001.1.22				
HOMESTEAD FL 33030			83					
			84	025			85 Zip C	- Code
				City		FL	85 Zip C	,ode
11, Pursuant office or ragent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auto ations of, Section 607.0505, Florid	horized by la Statutes	the corporati	poration submits this statement for the ion's board of directors. I hereby accer	ot the appoir	ntment as reg	gistered
12.		ND DIRECTORS	13.	in Digitatory Tarquit	ADDITIONS/CHANGES TO OF		D DIRECTO	RS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		1,000,000		Change	Addition
NAME	_		1.2 NAME	Į				Į
				TADDRESS	•)
STREET ADDRESS			1.4 C/TY-S	- 1				}
CITY-ST-ZIP TITLE			2.1 TITLE	11-23F			Change	Addition
	<u> </u>						-	
NAME			2.2 NAME	TADORESS				
STREET ADDRESS	'							1
CITY-ST-ZIP			2.4 CITY-S 3.1 TITLE	51-ZIP			Change	. Addition
TITLE		_ Detert	3.2 NAME					_
NAME								
STREET ADDRESS				TADORESS				
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP			Change	Addition
TITLE			4.1 TITLE				~ m.gc	
NAME	•		4. 2 NAME					
STREET ADDRESS	7.1			TADDRESS				
CITY-ST-ZIP			4.4 CITY-S	ST-ZIP	www.		· Change	Addition
TITLE		☐ DELETE	5.1 TITLE				☐ Change	☐ Addition
NAME			5.2 NAME		•			1
STREET ALDRESS				TADORESS				
CITY, ST 7/D	}		5.4 CITY-S	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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.1 TITLE

62 NAME

6.3 STREET ADDRESS

☐ DELETE

SIGNATURE: VERGINGRED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-30-99

305) 951-5729

☐ Addition

Change