FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90145 023 ***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 # P98000041382

1. Corporation Name

BUSSELL'S PAINTING & WATERPROCEING INC.

HUUUULL	LOIMINIO & WALLIN		NU, INO.				- 1				
Principal Place	e of Business		ailing Address								
·			· •								
15499 WEST DIXIE HIGHWAY 15499 WEST DIXIE HIGHWA' BAY #7 BAY #7.											
NORTH MIAMI BEACH FL 33162 NORTH MIAMI BEACH FL			33162				DO NOT WRITE IN THIS SPACE				
							- 1	3. Date incorporated or	Qualifed		
								05/05/1998			
2. Principal P	lace of Business	2a.	. Mailing Address	•				4. FEI Number		A	oplied For
21		26	•					65-083	59062		ot Applicable
Suite, Apt.	#, etc.	<u> </u>	Suite, Apt. #, etc.					5. Certifcate of Status D	esired	• -	Additional
22		27	- ,		<u>.</u>	وسر بسدين	=-	# 0 2 <u>04 2 2 7 7 4</u>			equired
City & Stat	е	\vdash	City & State					Election Campaign Fi	- 11		May Be
23		28						Trust Fund Contribution			to Fees
Zip	Country	\vdash	Zip	_	untry	'		8. This corporation owes			
24	[25]	29	 	30	٠.			Personal Property Ta		Yes	□No
	9. Name and Address of Currer	nt Regis	tered Agent		81	Name		10. Name and Address	of New Registere	a Agent	
RHS	SELL, FREDERICK B				"	Name					
15499 WEST DIXIE HIGHWAY					82	Street /	Addres	ress (P.O. Box Number is Not Acceptable)			
BAY #7					-	<u> </u>					
NORTH MIAMI BEACH FL 33162					83						-
11011	THE MINING BENCH I E 30102				84	City				85 Zip	Code
						<u> </u>			F		
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florid	ta. Such change was a	uthorize	ed by	the corpo	corpora oration	ation submits this statemer is board of directors. I here	nt for the purpose by accept the app	ointment as re	egistered
SIGNATURE								·	•		Į.
	Signature, typed or printed name of registered age			_		nt signature re	equired w	hen reinstating)	DATE		
12.	OFFICERS AI	ND DIRE		13		· · ·	_r	ADDITIONS/CHANGES	S TO OFFICERS		
TITLE	D		☐ DELETE	1.1	TITLE					Change	☐ Addition
NAME	RUSSELL, FREDERICK B			1.2	NAME						
STREET ADDRESS	15499 WEST DIXIE HIGHWAY,		¥ 7	1.3	STREE	T ADDRESS					
CITY-ST-ZIP	NORTH MIAMI BEACH FL 331	62			CITY-\$	T-ZIP					
TITLE	D			2.1	TITLE					☐ Change	☐ Addition
NAME	WILSON, SHIRLEY A		•	2.2	NAME						ļ
STREET ADDRESS	20174 SW 122ND COURT EAS	ST		2.3	STREET	T ADDRESS					ĺ
CITY-ST-ZIP	MIAMI FL 33177			_	CITY-S	T-ZIP				r c:	
тпье				3.1.	TITLE					Change	_ Addition
NAME				3.2	NAME						
STREET ADDRESS				3.3	STREET	T ADDRESS					
CITY-ST-ZIP				3.4.	CITY-S	T-ZIP					
TITLE			☐ DELETE	4,1	TITLE					Change	Addition
NAME				4. 2	NAME						
STREET ADDRESS				4.3	STREET	T ADDRESS					}
CITY-ST-ZIP				4.4	CITY-S	T-ZIP					
TITLE			☐ DELETE	5.1	TITLE					Change	☐ Addition
NAME				5.2	NAME						
STREET ADDRESS		•		5.3	STREET	T ADDRESS					
CITY-ST-ZIP				5.4	CITY-S	T-ZIP					
TITLE			☐ DELETE	6.1	TITLE					Change	☐ Addition

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 appears 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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-\$T-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP