## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## P98000066222 **DOCUMENT #**

1. Entity Name CRESPO PAINTING, INC.

SIGNATURE:



## **FILED** Jan 21, 2003 8:00 am Secretary of State

01-21-2003 90079 024 \*\*\*150.00

1-15-03 (234) 434-7267

Principal Place	of Business	Mailing Address						
2585 OUTRIGGER LANE		2585 OUTRIGGER LANE						
NAPLES FL 3410		NAPLES FL 3410	4			. (182)   80   180   1810   1811   1811   1811   1811   1811   18	ARIA ALIIA AIIRE IIAIA II	ALD (1881 1881)
2. Principal Pla	ace of Business	3. Mailing Address			-	LEGISTRA SIA SULUS PERIS EURI GOTA GUSA T	<b> 1  1                                </b>	71 <b>0</b> 1101 1001
Outto Ame d	1 oto	Suite Apt. #. 6	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES		
Suite, Apt. #	r, etc.	Outro, April 11, 1	Suite, vipa iii, etc.					
City & State		City & State	- <del></del>		4. FEI	Number <b>59-3525840</b>	<b>⊢</b>	plied For t Applicable
Zip	Country	Zip	Cour	ntry	<b>5.</b> Cer	tificate of Status Desired	\$8.75 Add Fee Require	
	6. Name and Address of Currer	nt Registered Agent	الأاص والمصاد أتيا	و و محمد محمد ا	7 Nan	ne and Address of New Registo	ered Agent	<u></u>
				Name		•		
CRESPO, ARIEL G				Street Address (P.O. Box Number is Not Acceptable)				
	RIGGER LANE			Oli Oct / Ida / Go				
NAPLES FL								
	· · •			City			FL Zip Cod	e
			<del></del>	1 66	haved occur	or both, in the State of Florida		and accept
8. The above	named entity submits this statement	for the purpose of cha	anging its registe	rea ornice or regis	iereo ageni	, or bolls, its title otate of Florida.	Tarritarima: 7784	
the obligati	ons of registered agent.							
SIGNATURE -	,		(NOTE: Beginton	red Agent signature requ	ired when reinst	ating)	DATE	
	Signature, typed or printed name of registered age	ent and title if applicable.	(NOTE: Hegister	en ydeur aignargia iado	100 47 101 701 701		~	
	LE NOW!!! FEE IS \$150.00					9. Election Campaign Financin		<b>0</b> May Be
After	May 1, 2003 Fee will be \$550.0	O State				Trust Fund Contribution.	니 Added	d to Fees
Make Check	Payable to Florida Department					TIONS/CHANGES TO OFFICER	S AND DIRECTOR	S IN 11
10.		ID DIRECTORS			7001	110110701771192010	Change	☐ Addition
11700	VSTD Crespo, Ariel G		201010	ME .				
NAME STREET ADDRESS	2585 OUTRIGGER LANE			REET ADDRESS				
	NAPLES FL 34104		CIT	ry-ST-ZIP				
	PSTD		Till	TLE .			☐ Change	☐ Addition
	CRESPO, JEAN		•	ME				
	2585 OUTRIGGER LN		ST	REET ADDRESS				
CITY-ST-ZIP	NAPLES FL 34104		CI.	TY-ST-ZIP				
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NAME				AME				
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP				TY-ST-ZIP			Change	Addition
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NAME			1	AME Treet address				
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CITY-ST-ZIP				TLE			☐ Change	Addition
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STREET ADDRESS CITY-ST-ZIP			C	ITY-ST-ZIP				
	<del> </del>		Delete Ti	TLE			☐ Change	Addition
TITLE NAME		، ت		AME				
STREET ADDRESS			s <sup>-</sup>	TREET ADDRESS				
CITY-ST-ZIP	1			ITY-ST-ZIP				
	certify that the information supplied	with this filing does no	ot qualify for the e	xemption stated in	Section 1	19.07(3)(i), Florida Statutes. I furt	her certify that the	information
indicated	certify that the information supplied of this report or supplemental report or the receiver or trustee end, or on an attachment with an address.	mnowered to execute	this report as rec	nature shall have t quired by Chapter	the same le 607, Florid	gal effect as if made under oath; a Statutes; and that my name ap	; mat ι am an οπισε pears in Block 10 ι	a or director or Block 11 if