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 # P98000068045

1. Corporation Name

BUDGET PAINTING, INC.

									(8) 3 3 1	0)011 011) 111) 4:06:01:16
Principal Place	DAYTONA BEACH FL 32117 DAYTON						i n t s h ett k nett	91801 BIII 1881		
810 DERBYSHIR	RE ROAD	810 DERBYSHIRE ROAD								
DAYTONA BEACH FL 32117		DAYTONA BEACH FL 32117				DO NOT WRITE IN THIS SPACE				
						}	Date Incorporated or Qualifed		FACE	
							08/04/1998	-		,]
2 Principal P	lace of Business	2a Mailing Address					4. FEI Number		A	pplied For
21	ace of Business	-				l	59-352618	8		ot Applicable
Suite, Apt. #, etc.						7			\$8.75	Additional
22		27					5. Certifcate of Status Desired		Fee R	equired
City & State		City & State					6. Election Campaign Financing		\$5.00	May Be
23		28				_	Trust Fund Contribution	<u> </u>	Added	to Fees
Zip	Country		_	ntry		ĺ	8. This corporation owes the cur	•		DE No
24	<u></u>)				Personal Property Tax.		☐ Yes	LMINO
	9. Name and Address of Curren	t Registered Agent	-	04	Nome		10. Name and Address of New	Registered A	gent	
NOI EN RILLY D				٠'	Name					<u>.</u>
	•			82	Street Ac	ldres	is (P.O. Box Number is Not Accept	able)		
DAYTONA BEACH FL 32117										
D/(I)	OUN BENOTIFE SELLY			"			_			
			Ī	84	City			FL	85 Zip	Code
44 Pursuant	to the provisions of Sections 607 0503	2 and 607 1508 Florida Statutes.	the ab	ove-	named co	rpora	ation submits this statement for the	purpose of c	hanging its	s registered
office or r	egistered agent, or both, in the State of	of Florida. Such change was auth	iorized	by t	he corpora	ition'	s board of directors. I hereby acce	pt the appoin	ment as re	egistered
SIGNATURE		(NOTE: D	aiotaza d	Accet	signature reg	dend sed	then reinstating)	DATE		
12.	Signature, typed or printed name of registered agen OFFICERS AN		13.	-Agent				-CIOCOO AND	DIRECTO	ORS IN 12
TITLE	D	DELETE	1.1 TITI	LE		71	LEN, BILLY D Derbyshire Rd 4tona Beach, Fl		Change	Addition
NAME	NOLEN, BILLY D		1.2 NAI	ME	/	VO	LEN, BILLY D.			
STREET ADDRESS	810 DERBYSHIRE ROAD		1,3 STREE		ADDRESS 4	810	Derbyshire Rd			
CITY-ST-ZIP				Y-ST-	-ZIP	Dori	ytona Reach, Fl	_ 3211	17	
TITLE		☐ DELETE	2.1 TITLE				·		☐ Change	☐ Addition
NAME			2.2 NA	ME						
STREET ADDRESS			2.3 ST	REET	ADDRESS					
CITY-ST-ZIP			2.4 CF	TY-ST	- ZIP			_		
TITLE		☐ DELETE	3.1 TITLE						☐ Change	☐ Addition
NAME			3.2 NA	ME						}
STREET ADDRESS			3.3 ST	REET	ADDRESS					ľ
CITY-ST-ZIP			34. CI	ry-ST	-ZIP					
TITLE		☐ DELETE	4.1 TIT	LE					Change	Addition
NAME			4, 2 NA	ME	-		_ ,			
STREET ADDRESS			4.3 STI	REET/	ADDRESS					}
CITY-ST-ZIP			4.4 CIT	_	- ZIP					
TITLE		☐ DELETE	5.1 TIT		1				Change	☐ Addition
NAME			5.2 NA							
STREET ADDRESS					ADDRESS		٠		-	•
CITY-ST-ZIP			5.4 CIT		-ZIP					
ΠΤLE		☐ DELETE	61 TIT	LE					☐ 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 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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

Feb 26, 1999 8:00 am Secretary of State

02-26-1999 90040 004 ***150.00