

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Sep 24, 1999 8:00 am
Secretary of State

09-24-1999 90018 004 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000072005

1. Corporation Name

PABLO'S PAINTING, INC.

Principal Place of Business
**7614 PASO DOBLES COURT
TAMPA FL 33615**

Mailing Address
**7614 PASO DOBLES COURT
TAMPA FL 33615**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/14/1998

4. FEI Number

59-3526379

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

**ACOSTA, JUAN PABLO
7614 PASO DOBLES COURT
TAMPA FL 33615**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **ACOSTA, ELENA R**
STREET ADDRESS **7614 PASO DOBLES COURT**
CITY-ST-ZIP **TAMPA FL 33615**

TITLE ☐ DELETE

NAME **ACOSTA, JUAN P**
STREET ADDRESS **7614 PASO DOBLES COURT**
CITY-ST-ZIP **TAMPA FL 33615**

TITLE ☐ DELETE

NAME **ACOSTA, PABLO E**
STREET ADDRESS **7614 PASO DOBLES COURT**
CITY-ST-ZIP **TAMPA FL 33615**

TITLE ☐ DELETE

NAME **BECERRA, JOSE H**
STREET ADDRESS **7614 PASO DOBLES COURT**
CITY-ST-ZIP **TAMPA FL 33615**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-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.

SIGNATURE:

REQUIRED

9/15/99

Date

Daytime Phone #

CRZE034 (5/99)

0087479

September 15, 1999

619786-90018-4
P98000072005

Florida Department of State
Katherine Harris
Secretary of State

Division of Corporations

TO WHOM IT MAY CONCERN:

Enclosed you will find check in the amount of \$150.00 for my annual fee.
We never received any notice until this notice. I do not know if the first
notice was lost in the mail or delivered to another address in error.

Please, I hope this take care of this matter and if there are any late charges or
etc., that you would please excuse us and delete them.

Thanking you in advance for handling this matter.

Juan Hector P.