

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90161 037 ***150.00

DOCUMENT # P98000099205

1. Entity Name

JOHN'S PAINTING OF SOUTH FL., INC.



Principal Place of Business

7920 COLONY CIR N
SUITE #209
TAMARAC FL 33329

Mailing Address

7920 COLONY CIR N
SUITE #209
TAMARAC FL 33329

2. Principal Place of Business

5256 NW 15 ST.

Suite, Apt. #, etc.

3. Mailing Address

5256 NW 15 ST.

Suite, Apt. #, etc.

City & State

MARGATE, FL

Zip

33063

Country

U.S.A.

City & State

MARGATE, FL

Zip

33063

Country

U.S.A.

4. FEI Number

65-0752623

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

GIRALDO, JOHN A

7920 W. COLONY

SUITE 209

TAMARAC FL 33321

7. Name and Address of New Registered Agent

Name

GIRALDO, JOHN A.

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

5256 NW 15 ST.

City

MARGATE

FL

Zip Code

33063

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

John A. Giraldo

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

(NOTE: Registered Agent signature required when reinstating)

04/25/03

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PSTD ☐ Delete
NAME GIRALDO, JOHN
STREET ADDRESS 7920 COLONY CIR N. SUITE 209
CITY-ST-ZIP TAMARAC FL 33319

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSTD ☐ Change ☐ Addition
NAME GIRALDO, JOHN
STREET ADDRESS 5256 NW 15 ST.
CITY-ST-ZIP MARGATE, FL 33063

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

John A. Giraldo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/25/03

Date

Daytime Phone #

CR2E034 (10/02)