## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED** DOCUMENT # P99000080013 Apr 19, 2000 8:00 am Secretary of State A & J PAINT GROUP INC. 04-19-2000 90111 031 \*\*\*158.50 Mailing Address Principal Place of Business 11858 SW 98 TERR. 11858 SW 98 TERR. MIAMI FL 33186-2766 MIAMI FL 33186 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State Not Applicable 65-0946935 -Country Zip Country **\$8.75**-Additional == 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ARAUJO, ANGEL I Street Address (P.O. Box Number is Not Acceptable) 11858 SW 98 TERR. **MIAMI FL 33186** Zip Code 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. П Trust Fund Contribution. Added to Fees (See criteria on back) -Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. Addition ☐ Thange PD TITLE ☐ Delete TITLE ARAUJO, ANGEL I NAME NAME STREET ADDRESS STREET ADDRESS 11858 SW 98 TERR. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33186 [X] Change Addition Delete TITLE TITLE GIL. JULIO J NAME ARAUJO, LUIS A: NAME 11858 SW 33186rr STREET ADDRESS 11858 SW 98 TERR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI\_FL,33,186. ☐ Change Addition X Delete TITLE TDate -ARAUJO, LUIS A NAME NAME ARAUJO, MARIA DE LOS ANGELES STREET ADDRESS STREET ADDRESS 11858 SW 98 TERR. 11858 SW 98 Terr. CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33186** MIAMI ☐ Change ☐ Addition TITLE TITLE Delete ALEJANDRO BLASINI, MAIKEL NAME NAME STREET ADDRESS STREET ADDRESS 11858 SW 98 TERR. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33186 ☐ Change Addition ☐ Delete TITLE DILE NAME STREET ADORESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP ☐ Change Addition Delete TITLE NAME ADDRESS STREET ADDRESS Arthe exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information at my signature shall have the same legal effect as if made under oath; that I am an officer or director effort as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if 13. I hereby certify that the information supplied with this indicated on this report or supplemental re of the corporation or the receiver changed, or on an attachment

ANGET ARAIUO) President

SIGNATURE: