2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

1.

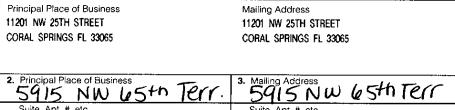
BA



FILED Feb 06, 2003 8:00 am Secretary of State

02-06-2003 90107 010 ***150.00

OCOIVIENT# P	99000100140			
y to bay painting and) WATERPROOFING, INC.			
ncipal Place of Business	Mailing Address			





<u> </u>	NW 45" 1811	2915 NW 4	2 2111 10						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
TOX & State	land Fl	Parkland	FI	4.	FEI Number 6	5-0971415		pplied For ot Applicable	
3306	Ountry USA		County USA	5.	Certificate of Sta	atus Desired	\$8.75 Ad Fee Require	ditional	
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent -				
Name Class									
SISSO, URI			Street-A	Street Andress JP.O. Box Number is Net Add Cotablet 2 (CO. 4)					
11201 NW 25TH STREET				1/5 K	dress (P.O. Box Number is Not Afgentable Terrace				
CORAL SPRINGS FL 33065									
<u> </u>	- 49-1-1-		off	irkla	nd	-	FL 333	067	
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 _	(2) (2) (C)								
	Signature, typed or pinted name of registered agent and	tittle if applicable. (NOTE: Re	egistered Agent signat	ure required when re	einstating)	DAT	E		
FI	LE NOW!!! FEE IS \$150.00								
	May 1, 2003 Fee will be \$550.00	Į.			9. Election	Campaign Financing	\$5.0)0 May Be	
	Payable to Florida Department of S	State			Trust Fu	nd Contribution.	☐ Adde	d to Fees	
10.	OFFICERS AND D	IRECTORS	11.	۸۲	DITIONS (CHA)	NGES TO OFFICERS A	ND DIRECTOR	C IN 11	
	D		TITLE	D	DITIONS/CHAI	IGES TO OFFICENS A			
	SISSO, URI	☐ Delete	NAME	_	nR.I		Change	Addition	
	11201 NW 25TH STREET		STREET ADDRESS	1336	URI 65	h Terrace			
	CORAL SPRINGS FL 33065		CITY-ST-ZIP	1 34121	1000 0 Z	33067		Ţ	
				Parkl	ana +1	190001			
	ST	☐ Delete	TITLE	21			Change	☐ Addition	
	SISSO, VIVIAN		NAME OTREET ADORESS	31550	VIVIAN	n Terrace		1	
	11201 NW 25TH STREET		STREET ADDRESS					1	
	CORAL SPRINGS FL 33065		CITY-ST-ZIP	Parki	ouna H	33061			
TITLE	,=	☐ Delete	- JITLE	/	····	· e* **- * •	- 🔲 Change	Addition 1	
NAME			NAME						
STREET ADDRESS			STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP			· .			
TITLE		☐ Delete	TITLE				Change	☐ Addition	
NAME			NAME						
STREET ADDRESS			STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP	-					
TITLE		☐ Delete	TITLE			······································	☐ Change	Addition	
NAME			NAME						
STREET ADDRESS			STREET ADDRESS					{	
CITY-ST-ZIP	•		CITY-ST-ZIP						
TITLE		☐ Delete	TITLE				☐ Change	Addition	
NAME		_ 24444	NAME				ت درستان		
STREET ADDRESS			STREET ADDRESS						
CITY_ST_7IP			CITY CT 71D						

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 cath; 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 it changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CR2E034 (10/02)