

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Oct 07 1998 8:00am
Secretary of State

00/4/98

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S42473** (6)
1. Corporation Name
CLASSIC PAINTING AND WATERPROOFING, INC.

Principal Place of Business

542 SE 12TH AVE.
DEERFIELD BCH FL 33441

Mailing Address

542 SE 12TH AVE.
DEERFIELD BCH FL 33441

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/01/1991

4. FEI Number

65-0355631

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$0.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☐ No

2. Principal Place of Business

21 1126 S. Federal Hwy

Suite, Apt. #, etc.

22 Suite 167

City & State

23 Ft. Lauderdale, Fl.

Zip

24 33316

Country

25 USA

2a. Mailing Address

26 1126 S. Federal Hwy

Suite, Apt. #, etc.

27 Suite 167

City & State

28 Ft. Lauderdale, Fl.

Zip

29 33316

Country

30 USA

9. Name and Address of Current Registered Agent

SHIELDS, WILLIAM J.

542 SE 12TH AVE

DEERFIELD BEACH FL 33441

1126 S. Federal Hwy
Ft. Lauderdale, Fl. 33316

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

William J. Shields

(NOTE: Registered Agent signature required when reinstating)

9-28-98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME D SHIELDS, WILLIAM J.
STREET ADDRESS 542 SE 12TH AVE 1126 S. Federal Hwy
CITY-ST-ZIP DEERFIELD BEACH FL Ft. Lauderdale, Fl.

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

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:

William J. Shields

9-28-98 (954)
439-1588

CR2E034 (5/98)