FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

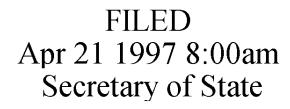
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(1)

H & A PAINTING, INC.

Principal Place of Business

Mailing Address





1280 W BO TER HIALEAH FL 33			1280 W 60 TERRACE HIALEAH FL 33012-6311									
							3. Date Incorporated or Qualified 04/08/1991	3a. Date of Last Report 05/01/1996				
2. Principal P	lace of Busines	2a. Mailing	2a. Mailing Address				4. FEI Number	1 44,41,	T - 11	oplied For		
21		26	26				65-0254192		No	ot Applicable		
Sulte, Apt.		Suite, #	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required				
Oity & State	e	City & S	City & State				6. Election Campaign Financing		\$5.00	May Be		
13			28	28				Trust Fund Contribution		Added t		
Zip	<u></u>	Country	Zip	h				8. This corporation has liability for intangible tax under s. 199.032				
24	4 25 25 S. Name and Address of Current			9 30				Florida Statutes Yes No				
***			rent Registered Ag	gent		227		10. Name and Address of New Re	gistered Age	nt		
	EIDA, REBEC					81	Name					
	WEST 20 A					Street Address (P.O. Box Number is Not Acceptable)						
	TE 28 0 よみ EAH FL 3301					83						
					-	84	City		FL ⁸	5 Zip (Code	
11. Pursuant office or ragent. La								orporation submits this statement for the pration's board of directors. I hereby accep		langing it	s registered registered	
	Signature, lyped or p		agent and title if applicable	e (NO1		Agor	nt signature re	quired when reinstating)	DATE			
12.	8	OFFICERS	AND DIFF CTORS	DELETE	13.			ADDITIONS/CHANGES TO OFFIC				
TITLE	SANTAMAR	IA.			1110					Change	Addition	
NAME STREET ADDRESS	1251 W. 60				1.2 NA							
8.3	HIALEAH FL						ADDRESS					
CITY-\$T-ZIP TITLE	v			DELETE	1.4 CH 2.1 1H		- ZIP			Change	Addition	
NAME	ALMEIDA, H	IORTENSIA		Decent	2.2 NA					Ghange	L. AUGILION	
:	REET ADDRESS 1280 W. 60 TERR.			2.3 \$			ADINDECO				İ	
CITY-ST-ZIP												
TITLE	P			DELETE	2. 4 CI 3.1 TiT		1 - 211		П	Change	Addition	
NAME	ALMEIDA, H	ECTOR			3.2 NA					Diango	L. J resilient	
STREET ADDRESS	1280 W 60						ADDRESS				İ	
CITY-ST-ZIP	HIALEAH FL	33012			3.4. C(
TITLE		·		DELETE	4.1 TIT		<u>'</u>			Change	Addition	
NAME	-				4. 2 NA	ME						
STREET ADDRESS					1		ADORESS					
CITY-ST-ZIP					4.4 CIT							
TITLE			·····	DELFTE	5.1 7(1					Change	Addition	
NAME					5.2 NA	ME			_	*		
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP					5.4 CIT						j	
TITLE	7			DELF 1E	G.1 TIT					Change	Addition	
NAME				•	6.2 NAI				_	•		
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP					6.4 CIT							
	ov certify that th	o information survi	slind with this filing o	door not avali	by for the	. J.	ontion stat	lad in Section 110 07(9)(i) Florido Statuto	. 11	11		

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 an an attachment with an address.