FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

(9)

102011	5 4 IA PT-11 1 5	
AGHON	PAINTING.	INC.

Principal Place of Business	
1160 EAST LASALLE STREET HERNANDO EL 32642-9653	



Principal Place of Business		Mailing Address	Mailing Address						
	LASALLE STREET FL 32642-9653	1160 EAST LASALLE HERNANDO FL 3264							
						Date Incorporated or Qualified 04/09/1991	3a. Date		t Report /1995
2. Principal Pla	ce of Business	2a. Mailing Address				4. FEI Number		L	Applied For
21 Suite, Apt. #	l oto	26				59-3060449			Not Applicable
22	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			75 Additional ee Required
City & State		City & State	·			6. Election Campaign Financing			
23		28	-¬ '			Trust Fund Contribution			.00 May Be ded to Fees
Zip	Country	Z _I p	Counti	ry		8. This corporation has liability for in	tangible tax		
24	25	29	30			Florida Statutes			,
	9. Name and Address of Curren	t Registered Agent]			10. Name and Address of New Re	gistered A	gent	
			6	1 Na	ame				
	NN, BRUCE		8:	2 St	reet Addres	s (P.O. Box Number is Not Acceptable	e)		
	LASALLE ST								
HERNA	NDO FL 32642		8:	3					i
			8-	4 Ci	y			85	Zip Code
11 Dureuant to	the provisions of Sactions FOZ 0502	and CO7 1500 Cleride Ctet 4				ion submits this statement for the purp	FL	Щ.	
or registere	d agent, or both, in the State of Florid	da. Such change was authoriz	es, the above zed by the cor	-name porati	on's board	on submits this statement for the purp of directors. Thereby accept the appo	ose of char intment as r	iging it egister	s registered office red agent. I am
	n, and accept the obligations of, Secti	ion 607.0505, Florida Statutes	3						
SIGNATURE _	Signature typod or printed name of registered agent	and title if enrificable (NC	D1E: Rogistered Ag	ont sinus	at the recording of	tag miretalog	DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC		DIREC	TORS IN 12
ŤITLE	D	DELETE	1. 1 TITLE		I			Chang	
NAME ¿	HERMANN, BRUCE		1.2 NAME	=					
STREET ADDRESS	1180 E LASALLE ST		1.3 STREE	ET ADOF	ESS				
CITY-ST-ZIP	HERNANDO FL		1.4 CITY-	ST-ZIP					
TITLE	\$	☐ DELETE	2 1 1111.8	:				Chang	e 🔲 Addition
NAME	HERMANN, TERESA		2 2 NAME	=					
STREET ADDRESS	1160 EAST LASALLE STREI	ET	2 3 STREE	et addr	ESS				
CITY-ST-ZIP	HERNADO FL		24 CHY-						
TITLE		DELETE	3 1 TITLE					Chang	e 🗀 Addition
NAME			3 2 NAME						
STREET ADDRESS			33 STRE		RESS				
CITY-ST-ZIP TITLE		DELETE	3 4 CITY-					06	
NAME		[] precit	4. 1 TITLE 4.2 NAME		ŀ		L.	Chang	ie 🗌 Addition
STREET ADDRESS					100				
CITY-ST-ZIP			4.3 STREE		1				
TITLE		DELETE	4.4 CITY - 5 1 TITLE					Chang	e Addition
NAME		—	5 2 NAME				نسا	Onlang	is [] Addition
STREET ADDRESS			5 3 STREE		ess				
CITY-ST-ZIP			5.4 City-						
TITLE		DELETE	6. 1 TITLE					Chang	e Addition
NAME			6.2 NAME				_		_
STREET ADDRESS			6.3 STREE		ESS				
CITY-ST-ZIP			6.4 CITY-	ST-ZIP					
14. I do hereby	certify that the information supplied v	vith this filing is voluntarily furn	nished and do	es not	qualify for	the exemption stated in Section 119.0	7(3)(k), Flori	da Sta	tutes. 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 trusted 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 attackment with an address.

5-3-96- 352-746-9004