

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

FILED
Apr 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V13220 (1)
1. Corporation Name
FREE COAST PAINTING CONTRACTORS, INC.

Principal Place of Business C/O DEMETRIOS KEKEMPANOS 1791 BLOUNT RD. #609 POMPANO BEACH FL 33069	Mailing Address C/O DEMETRIOS KEKEMPANOS 1791 BLOUNT RD. #609 POMPANO BEACH FL 33069
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1769 Blount Rd. Suite, Apt. #, etc. 22 # 111 City & State 23 Pompano Beach, FL Zip 24 33069		2a. Mailing Address 26 1769 Blount Rd. Suite, Apt. #, etc. 27 Box 111 City & State 28 Pompano Beach, FL Zip 29 33069		3. Date Incorporated or Qualified 02/10/1992	
				4. FEI Number 65-0317777	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent KEKEMPANOS, DEMETRIOS 1791 BLOUNT RD SUITE 609 POMPANO BEACH FL 33069		10. Name and Address of New Registered Agent 81 Name KEKEMPANOS, DEMETRIOS 82 Street Address (P.O. Box Number is Not Acceptable) 1417 AVON LANE, #202 83 84 City WILAUDEDALE FL 85 Zip Code 33068	
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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 *Demetrios Kekempanos* DATE 4.3.98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPT	1.1 TITLE	
NAME	KEKEMPANOS, DEMETRIOS	1.2 NAME	
STREET ADDRESS	1417 AVON LANE #202	1.3 STREET ADDRESS	
CITY-ST-ZIP	NO. LAUDERDALE FL 33068	1.4 CITY-ST-ZIP	
TITLE	P	2.1 TITLE	
NAME	KEKEMPANOS, TERRIS	2.2 NAME	
STREET ADDRESS	6710 NW 20 ST.	2.3 STREET ADDRESS	
CITY-ST-ZIP	MARGATE FL 33063	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: *Demetrios Kekempanos* DATE: 4.3.98 934-968 3753

CR2E034 (10/97)