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

DOCUMENT # V26197

(6)

SUPERIOR PAINTING BY STEVE AUERBACH, INC.

Principal Place of Business Mailing Address						
21120 NORTHEAST 18TH COURT 21120 NORTHEAST 18TH NORTH MIAMI BEACH FL 33179 NORTH MIAMI BEACH FL						
					3. Date Incorporated or Qualified 04/03/1992	3a. Date of Last Report 05/01/1996
2, Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0326417	Not Applicable
Suite, Apt.	#, €1G.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	City & State		# Floation Compains Floation	· · · · · · · · · · · · · · · · · · ·
23		28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζιρ	Country	Zip	Count	ry	8. This corporation has liability for it	
24	25	29	30			Yes No
g. Name and Address of Current Registered Agent					10. Name and Address of New Re	sistered Agent
	RBACH, BRENDA		8	1 Name		
	20 NE 18 CT		8	2 Street Add	ress (P.O. Box Number is Not Acceptab	le)
NO I	MIAMI BCH FL 33179					
			8	3		
			8	4 City	· · · · · · · · · · · · · · · · · · ·	85 Zip Code
44 5	10.17.607.0	(60 - 1 007 1500 Fb-21 0b-1				FL S 20000
office or re	egistered agent, or both, in the Sta	te of Florida, Such change was	authorized	oy the corpora	poration submits this statement for the pi tion's board of directors. I hereby accep	orpose of changing its registered in the appointment as registered
agent. Lai	m lamiliar with, and accept the obl	igations of Section 607.0505, Fi	lorida Statut	es.		
SIGNATURE	Signative, typed or periled name of registered	anent and title it anothrable (NO	TF: Benistered A	nent signature requi	ired when re-nstating)	DATE
12.		ND DIRECTORS	13.	gur og att ogs	ADDITIONS/CHANGES TO OFFIC	
TITLE	DP	DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	AUERBACH, BRENDA		1.2 NAM	E		
STREET ADDRESS	21120 N.E. 18 CT.		1 3 STRE	et address		
CHY-ST-Zi€	n. Miami Beach Fl		1.4 C/TY	ST-ZIP		
TITLE		DELETE	21 TITLE			Change Addition
NAME			22 NAM	E		
\$TREET ADDRESS			2 3 STRE	et address		
CHY-ST-ZiF	E. S. H	Llocuste	2. 4 CiTy			
Title		☐ DELETE	31 TITLE		•	Change L_ Addition
NAME STOLE LABORERS			3 2 NAM	-		
STREET ADORESS				ET ADDRESS		
CITY-ST-ZIF TITLE		DELETE	3 4. CITY 4 1 TITLE	*** **********************************	·	Change Addition
NAME			4. 2 NAN			
STREET ADORESS				ET ADDRESS		
CITY-ST-ZIF			4.4 CITY			
TITLE		DELETE	5 1 TITLE			Change Addition
NAME			5 2 NAM	Ε		
STREET ADDRESS			5.3 STRE	ET ADDRESS		
CITY-ST-ZIF	-/ FFTTV		5 4 CITY	-ST-ZIP		
TOLE		☐ DELETE	6.1 TITLE			Change Addition
NAME		-	6.2 NAM	E ,		
STREET ADORESS			6.3 STRE	et address		
CITY: ST-ZiP	•		6 4 CITY	-ST-ZIP		

14. I do 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: Quendo

FILED

Feb 04 1997 8:00am

Secretary of State