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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V38361

(4)

J. SOURINI PAINTING, INC.

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May 02 1997 8:00am

Secretary of State

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Principal Place	e of Business	-	Mailing Address			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
12800 44TH STREET NORTH CLEARWATER FL 34822		12800 44TH STREET CLEARWATER FL 34					
					3. Date Incorporated or Qualified 05/22/1992	3a. Date of Last F 08/12/1996	Report
2. Principal Pla	ace of Business	2a, Mailing Address	S		4. FEI Number	A	pplied For
21		26	26		59-3126957	Not Applicable	
Sulte, Apt. 4	#, etc.	Suite, Apt. #, etc	c.		5. Certificate of Status Desired	1 1 1	Additional
22		27					equired
City & State	•	City & State			6. Election Campaign Financing		May Be
23		28	1 60	untry	Trust Fund Contribution		to Fees
Zip	Country	Zip	30	untry	8. This corporation has liability for in Florida Statutes	ntangible tax under s] Yes - [💢] No	3. 199.032,
24	25 Name and Address of Curi	rent Registered Agent	1301	T	10. Name and Address of New Reg		
9011	IRINI, JAMES R			81 Name			
	00 44TH STREET NORTH				(0.0 B) H = 1 - 1 H = 4 - 1 H = 4 - 1 H = 4 - 1 H = 4 - 1 H = 4 H	1-1	
	ARWATER FL 34622			82 Street Add	dress (P.O. Box Number is Not Acceptable	ie)	
OLL	ANTAILIT I E OTOLE			83			
				84 City		85 Zip	Code
			5	<u> </u>		FL s z p	4
11. Pursuant t	to the provisions of Sections 607.0 ealstered agent, or both, in the St	3502 and 607.1508, Florida ate of Florida. Such change	Statutes, the a was authorize	above-named cor ed by the corpora	poration submits this statement for the pution's board of directors. I hereby accep	urpose of changing i at the appointment as	its registered s registered
agent. I ar	m familiar with, and accept the ob	oligations of Section 607.05	05, Florida \$ta	atutes.			
SIGNATURE		annul and it a Wayreleast its	AIOTE Queidar	A Apont cinculus room	ered when repetating		
SIGNATURE	Signature, typed or printed name of registered			ed Agent signature requ		DATE	RS IN 12
SIGNATURE	Signature, typed or printed name of registered OFFICERS A	AND DIRECTORS	13.		ared when reinstating) ADDITIONS/CHANGES TO OFFIC		
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