2001	1 UNI	FORM BUŞI	NESȘ REPO	RT	(UBF	R)	· ·	Loren				
DOCU 1 Fotity Nam	MENT	# 148	094		16		DIVISION OF	LEO Y OF STATE CORPORATIONS				
Amer	rica's	Best Painting	and Waterproofin	j. I	nc.		2001 JUN 28	PM:3: 06				
Principal Place of Business 16499 N.E. 19th Avenue Suit 101 North Miarti Beach FL 33162						-						
2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & State			City & State			. 4.	4. FEI Number 65 - 0340241 Applied For Not Applicable					
Zip		Country	Zip	Country			5. Certificate of Status Desired \$8.75 Additional Fee Required					
	and Address of Current Re		Name	7.	Name and Address of	f New Registered A	Agent					
Guy R. Roblejo 16499 n.E. 19th Avenue					Street Address (P.O. Box Number is Not Acceptable)							
		101 Miami Beach F	2 331-2		City		FL Zip Code					
The above named entity submits this statement for the purpose of changing its register.												
SIGNATURE .		or printed name of registered agent and	Along	· Ossista	d Acont signatur	re required when	colectation	DATE				
					Terristating)	·						
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) **M** **M**			FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of Stat				10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
11.	00 0	OFFICERS AND D		12.	·····	Al	DDITIONS/CHANGES	TO OFFICERS AND			6	
NAME STREET ADDRESS CITY-ST-ZIP	PD-Rafael Notasco Delete 1649 NE 19th Are Suite 101 North Miami Beach Fe 33102				E ME EET ADDRESS (-ST-ZIP		Change					
TITLE NAME STREET ADDRESS	SD- Ambiorix Nolasco Delete 16499 n.E. 19th Avenue Suite 101				E ME EET ADDRESS				☐ Change		CRZE	
CITY-ST-ZIP TITLE NAME STREET ADDRESS	North Miami Beach & 33162 VPT. Guy R. Roblejo Delete - 16499-N.E19th Avenue - Suite 101 North Nibri Beach & 33162			TITL NAM STRI	ie Eet address		-0	004450 67287010 ***550.00	10870	009	-1 14	
CITY-ST-ZIP TITLE		Morth War Bea	Delete	TITL	I		<u> </u>	***330.00	*****55 □ Change	Addition		
NAME Street address City-St-Zip					eet address '-st-zip		LF	6-28-	-01	,		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				I	,			Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		12.11	☐ Delete		I			1	Change	Addition		
indicated of the cor	on this reportion or t	te information supplied with the supplemental report is to the receiver or trustee empowachment with an address, will	rue and accurate and that neered to execute this report	ny signa as requi	emption state ture shall ha ired by Chap	ed in Section ave the same oter 607, Flor	119.07(3)(i), Florida S legal effect as if made ida Statutes; and that	tatutes. I further cer e under oath; that I a my name appears in	ify that the ir m an officer i Block 11 or	nformation or director Block 12 if		

SIGNATURE: