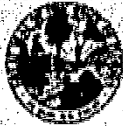


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 PM 1:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V51340 (0)

1. Corporation Name

ROO'S PAINTING & DECORATING, INC.

Principal Place of Business

7210 121 TERRACE
LARGO FL 34643
US

Mailing Address

7210 121 TERRACE
LARGO FL 34643
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
07/13/1992

3a. Date of Last Report
05/01/1994

4. FEI Number
59-3153647

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

6. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

23. City & State

24. Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27. City & State

28. Zip

Country

9. Name and Address of Current Registered Agent

**RHONDA, SHIRLEY
12157 - 71ST WAY NORTH
LARGO FL 34643**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

7210 121 TERR

83.

84. City

LA
LARGO

FL

85. Zip Code

34643

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

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DT**
NAME **SHIRLEY, RHONDA**
STREET ADDRESS **7210 121 TERRACE**
CITY - ST - ZIP **LARGO FL**

TITLE **PVS**
NAME **SHIRLEY, RHONDA**
STREET ADDRESS **7210 121 TERRACE**
CITY - ST - ZIP **LARGO FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PTD** ☐ Change ☐ Addition

1.2 NAME **SHIRLEY, RHONDA**

1.3 STREET ADDRESS **7210 121 TER.**

1.4 CITY - ST - ZIP **LARGO, FL 34643**

2.1 TITLE **VD** ☒ Change ☐ Addition

2.2 NAME **RON SHAMAN**

2.3 STREET ADDRESS **71492 61 Ave. N.**

2.4 CITY - ST - ZIP **SEMINOLE, FL 34642**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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:

RHONDA Shirley

4/27/95

813-631-0833

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Typing Fee is \$)