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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED May 11 1998 8:00am Secretary of State

	MENT # V513	40 (0)				
•	PAINTING & DECORAT	` '				
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Principal Place	o of Rusinose	Mailing Address				## 01011 013 14 01011 01011 # # 01
'		ū	·			
7210 121 TERRACE LARGO FL 34643		7210 121 TERRACE	7210 121 TERRAGE LARGO FL 34643			
US		US			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					07/13/1992	
	ace of Business		2e. Mailing Address		4. FEI Number	Applied For
21		26			59-3153647	Not Applicable
Suite, Apt.	₩, Q tC.	Suite, Apt. #, etc	\		5. Certificate of Status Desired	\$8.75 Additional
22 City & State	<u> </u>		City & State			Fee Required
23		28	- ∱•η '		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Country Zip Co		y	8. This corporation owes or has paid the cu	irrent year Intangible
24	25 29 30		30		Personal Property Tax due June 30. Yes No	
	g. Name and Address of Cu	irrent Registered Agent			10. Name and Address of New Registered	Agent
	onda, shirley		8	i Name		
	10 121 TERR		82 Street Ad		dress (P.O. Box Number is Not Acceptable)	· · · · · · · · · · · · · · · · · · ·
LAF	RGO FL 34643		63			
			63	1		
	•		84	1 City	FI	85 Zip Code
11. Pursuant t	to the provisions of Sections 607	.0502 and 607.1508, Florida Statu	les, the abov	ve-named co		
office or re	egistered agent, or both, in the S m temiliar with, and accord these	State of Florida. Such change was Indigations of, Section 607,0505, F	authorized b Iorida Statute	by the corpores.	prporation submits this statement for the purpose ration's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE		l-3				
SIGNATORE	Signature typed or printed name of registers	(NO	11: Hogistered As	gent aignature rec	DATE Daired which reinstating)	
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	• • •		1.1 TITLE			Change Addition
NAME	SHIRLEY, RHONDA		1.2 NAME			
STREET ADDRESS	7210 121 TERRACE LARGO FL		- 4	1 ADDRESS]
CITY-ST-ZIP			1.4 CNY- 2.1 TITLE	S1-ZIP		Change Addition
NAME			2.2 NAME	.		C ougula C vacuum
STREET ADORESS	11492 61 AVE. N.			i		
CITY-ST-ZIP	SEMINOLE FL		2.3 STREET ADDRESS 2.4 CITY - ST-2IP			1
TITLE	DELETE		3.1 TITLE	01-20	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME		· -	3.2 NAME			-
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			3 4. CITY			
TITLE		DELETE	41 TITLE			Change Addition
NAME			4 2 NAME	:		
STREET ADDRESS			43 STREET ADDRESS			
CITY-ST-ZIP			4 4 CITY - ST - ZIP			
TITLË		DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREE	T ADDRESS		}
CITY-ST-ZIP			5.4 CITY-	ST-ZIP		
TITLE		DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME	1		6.2 NAME			
STREET ADDRESS				1 ADDRESS		1
CitY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the				ST-ZIP	in Continu 110 07(9)(i) Elected Contract I	artifus that the information
14. THEREDY C	ermy man me imormation stropic	to with this timed dons bot dright t	ioi riie exemi	biron stated	in section i retor(s)(i), monda statutes, i further c	ernik tuat ton information

or tor supplemental amoual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an oralism or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in just or on an attachment with an address.

Attorna Shinley