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Apr 25 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # V58417 (9)

1. Corporation Name

FINE LINE PAINTING AND WATERPROOFING, INC.

Principal Place of Business

3920 NW 58 ST.
COCONUT CREEK FL 33073
US

Mailing Address

3920 NW 58 ST.
COCONUT CREEK FL 33073-4137
US

3. Date Incorporated or Qualified
08/18/1992

3a. Date of Last Report
04/03/1996

2. Principal Place of Business

21 5784 Homeland Rd
Suite, Apt #, etc.

2a. Mailing Address

26 5784 Homeland Rd
Suite, Apt #, etc.

22 City & State

23 Lake Worth FL
Zip 33467 Country

27 City & State

28 Lake Worth FL
Zip 33467 Country

4. FEI Number

NOT APPLICABLE

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

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

9. Name and Address of Current Registered Agent

HANCE, ANTHONY
3920 NW 58 ST.
COCONUT CREEK FL 33073

10. Name and Address of New Registered Agent

81 Name HANCE, Anthony
82 Street Address (P.O. Box Number is Not Acceptable)
5784 Homeland Rd
83
84 City Lake Worth FL 85 Zip Code 33467

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

Anthony C. Hance

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

(NOTE: Registered Agent signature required when reinstating)

4/18/97

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME HANCE, ANTHONY
STREET ADDRESS 3920 NW 58 ST.
CITY-ST-ZIP COCONUT CREEK 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P
1.2 NAME Hance, Anthony
1.3 STREET ADDRESS 5784 Homeland Rd
1.4 CITY-ST-ZIP Lake Worth FL 33467

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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:

Anthony C. Hance

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/97

DATE

5617981894

Daytime Phone #

0157492

CR2E034 (9/96)