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

**PROFIT CORPORATION ANNUAL REPORT** 



Secretary of State DIVISION OF CORPORATIONS

1998

**DOCUMENT** #

(3)

PAUL HOWARD'S PAINT & BODY SHOP, INC.

**FILED** Feb 10 1998 8:00am Secretary of State



Deignale at Olean	a of Division	Mailing Address		·····		EN BURN BURN AURUS BURN URB
9101 NORTH NEBRASKA AVE. TAMPA FL 33604		16317 E. COURSE DR. TAMPA FL 33624				
US		US			DO NOT WRITE IN THIS SPACE	
		••			3. Date Incorporated or Qualified	
					09/11/1992	
2. Principal Place of Business		2a, Mailing Address			4, FEI Number	Applied For
21		26			59-3192935	Not Applicable
Suite, Apt #, etc		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27			G. Solumbaro of Status Decision	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28 Country			Trust Fund Contribution	Added to Fees
Zip	Country Zip		Country	a. This corporation owes of has pare the content year mining be		
24	4 25 29 29 9, Name and Address of Current Registered A		30 ant		Personal Property Tax due June 30.  Yes No	
		it negistered Agent	81 1	Name	IU. Hame and Address of New Neglisters	a Agoitt
KOUSKOUTIS, N.M.						
114 S. PINELLAS AVE.			82	Street Addre	ess (P.O. Box Number is Not Acceptable)	
TARPON SPRINGS FL 34689			83			
			84 (	City		85 Zip Code
11. Pursuant to the provisions of Sections 607 0512 and 607 1508. Exvida Statutes, the above-named corporation submits this statement for the purpose of changing its registered.						
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Horida 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. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.						
SIGNATURE Signature, typed or product have of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstaling)  DATE						
12.		ID DIRI CTORS	T 13.	ng man o respons	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	P/D	DELETE	1.1 TITLE		7,55,7,0,10,0,11,11,020,10,0,17,021,07,0	☐ Change ☐ Addition
NAME	HOWARD, PAUL		1.2 NAME			
STREET ADDRESS	16317 E COURSE DR		1.3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33624		1 4 CITY-ST-ZIP			
TITLE	V/D	DELETE	2 1 TITLE			☐ Change ☐ Addition
NAME	HOWARD, ED		2.2 NAME			
STREET ADDRESS	4627 CLOVERLAWN DR		2 3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL		2 4 CITY-S1-ZIP			
TITLE	S/T	☐ DELETE	3.1 TITLE			Change Addition
NAME	HOWARD, CONSTANTINA		3.2 NAME			
STREET ADDRESS	16317 E COURSE DR		3 3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33624		3.4 CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4 4 CITY - ST - ZIP			
TITLE		DELETE	5 1 TITLE		<del></del>	☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET AD	ORESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELFTE	61 TITLE			Change Addition
NAME			62 NAME			
STREET ADDRESS			6.3 STREET AD	ORESS		
CITY-ST-ZIP			64 CITY-ST-Z	žiP		

14. Thereby 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 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 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 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 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 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 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 the 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 in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certificated in Section 119.07(3)(i), Florida Statutes. I further certificated in Section 119.07(3)(i), Florida Statutes. I f

SIGNATURE:

2-2-98

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