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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F9300000826 (8)

PERMA-COTE INDUSTRIES, INC.

F)	T.F.						A13 AIX (88)
Principal Place of Business Mailing Address					, realing the result filter point again south selft design 1949 1919 gift (20)		
29 INDUSTRIAL DRIVE LEMONT FURNACE PA 15456		29 INDUSTRIAL DRIVE LEMONT FURNACE PA 15456-9807					
US		US			3. Date Incorporated or Qualified 02/15/1993	3a. Date of Last 05/21/1996	
	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			25-1193977		Not Applicable
Suite, Apt	#. etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1 7	Additional
Cily & Stat		City & State				· · · · · · · · · · · · · · · · · · ·	Required
	· c:	28			6. Election Campaign Financing		O May Be d to Fees
<b>23</b> Zip	Country Zip		Cou	ntrv	Trust Fund Contribution		
24			30	,	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No		
*	9. Name and Address of Curren		1901		10. Name and Address of New Reg		
CT (	CORPORATION SYSTEM			81 Name		<del></del>	
	D S. PINE ISLAND ROAD			82 Street A	ddress (P.O. Box Number is Not Acceptab	le)	
PLANTATION FL 33324				95 20 86! W	ddress (P.O. Box Number is Not Acceptab	ie)	
				B3			
				04 07		TT	
				64 City		FL 85 Zi	p Code
11. Pursuant	to the provisions of Sections 607 050	2 and 607.1508, Florida State	utes, the al	pove-named c	orporation submits this statement for the paration's board of directors. I hereby accep		its registered
office or r agent 1 a	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida Such change was ations of, Section 607.0505. F	s authorize: Florida Stat	d by the corpo utes.	pration's board of directors. I hereby accep	t the appointment a	is registered
SIGNATURE							
SIGNATURE	Satisfability) ed or printed have of registered age	ni and fille r applicable (NC	OTE: Registered	Agent signature re	equired when reinstating)	DATE	B+
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	ORS IN 12
mie	PD	☐ DELETE	117)	rle		☐ Change	Addition
NAME	GEARING, JOSEPH P		1 2 N/	IME			
STREET ADDRESS	51 EMERSON STREET		1 3 ST	REET ADDRESS			
CITY ST-ZIP	UNIONTOWN PA 15401		14 C/	TY-ST-ZIP			
Till, E	SD	DELETE	2 1 TI	ILE		Change	Addition
NAME	GEARING, SHIRLEY		2 2 N/	ME			
STREET ADDRESS	51 EMERSON STREET		23 ST	REET ADDRESS			
CPY ST-7P	UNIONTOWN PA 15401		2 4 C	TY-ST-ZIP			
TIT; F	VP	☐ DELETE	31 T/	ILE		☐ Change	Addition
NAME	GEARING, DANIEL		3 2 N/	ME			
STREET ADDRESS	52 EMERSON STREET		3 3 ST	REET ADDRESS			
CITY-ST ZIP	UNIONTOWN PA 15401			TY - ST - ZIP			
TITLE	OPERATOR CARV	DELETE	4.1 T(			Change	Addition
NAME	GEARING, GARY		4 2 N				
STREET ADDRESS	126 UNION STREET			REET ADDRESS			
CHTY S1-ZIP	UNIONTOWN PA 15401	I neurte		ry-St-ZiP		T T as	1 1 1 1 1 1
DILL	1	DELETE	51 TI			Change	Addition
NAME CLEEK & ASSISSADE			52 N/				
STREET ACIDITESS				REET ADDRESS			
CITY SI ZIP		DELETE		ry-st-zip		Charac	Adda:
TITLE		☐ Deceip	61 10			L. Change	Addition
NAME STREET ADDRESS			62 NA				
·				REET ADDRESS			
0/14-51-7/P 14. Ldo berel	L hy certify that the information surpolicy	d with this filing does not aug		ry-ST-ZIP	ted in Section 119 07(3)(i) Elevida Statuta	I further certify the	at the
l informatic	on indicated on this annual report or s	cupolemental annual report is	trive and a	recurate and t	ted in Section 119.07(3)(i), Florida Statutes hat my signature shall have the same legal port as required by Chapter 607, Florida St	l elfect as if made i	inder oath: th

SIGNATURE:

SIGNATURE AND TOPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTION

3/14/97

412-628-9700

**FILED** 

Mar 18 1997 8:00am

Secretary of State

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