

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F99000005147

FILED
Aug 30, 2002
Secretary of State

Entity Name: M.E.C. THERMAL SPRAY, INC.

Current Principal Place of Business:

4201 ST LUCIE BLVD
FORT PIERCE, FL 34946

New Principal Place of Business:

Current Mailing Address:

2200 INDUSTRIAL WAY SOUTH
TOMS RIVER, NJ 08755

New Mailing Address:

FEI Number: 22-3499662

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AUSTIN, CHRISTINA
4201 B ST. LUCIE BLVD.
FORT PIERCE, FL 34946 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: KULKASKI, RICHARD
Address: 1210 GANNET COURT
City-St-Zip: FORKED RIVER, NJ 08731

Title: VCVT () Delete
Name: SZAPUCKI, MATTHEW
Address: 1282 WEST TODD ROAD
City-St-Zip: TOMS RIVER, NJ 08755

Title: S () Delete
Name: PAVAO, LYNDIA
Address: 519 NORTHERN BLVD.
City-St-Zip: BAYVILLE, NJ 08721

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: PAVAO, LYNDIA
Address: 210 ELIZABETH AVE
City-St-Zip: TOMS RIVER, NJ 08753

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LYNDIA PAVAO

S

08/30/2002

Electronic Signature of Signing Officer or Director

Date