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

PROFIT CORPORATION ANNUAL REPORT 1999



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FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90021 004 ***150.00

SOLID SURFACE OF VERO BEACH, INC.					
Principal Place of Business Mailing Address					FIETH BILLET (FEET BILLO LANS FEET)
6010 OLD DIXIE HWY. SUITE E 6010 OLD DIXIE HWY. SUITE E					
VERO BEACH FL 32967 VERO BEACH FL 32967				DO NOT WRITE IN THIS	SPACE
72110 0210171				3. Date Incorporated or Qualifed	
				03/19/1996	
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0655779	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22	in the second se	27	را د سمي ساد د رامم	5. Certifcate of Status Desired	Fee Required
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year In	tangible
24	25	29 30	i]	Personal Property Tax.	Yes No
- : 1	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registered	Agent
GOODMAN, HOLLIS W JR 760 16TH AVE VERO BEACH FL 32962				ess (P.O. Box Number is Not Acceptable) 55 22nd Avenue	U. Jr.
			84 City		85 Zip Code 32960
		NO Beach FL	- 32960		
11. Pursuant to the provisions of Sections 607.0502 and 697.1508, 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	DP	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	GOODMAN, HOLLIS W JR		1.2 NAME		
STREET ADDRESS	760 16TH AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL 32962		1.4 CITY-ST-ZIP		
TITLE	DVS	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	GOODMAN, SUE A		2.2 NAME		
STREET ADDRESS	760 16TH AVE		2.3 STREET ADDRESS		•
CITY-ST-ZIP	VERO BEACH FL 32962		2.4 CITY-ST-ZIP	and the same of th	· =
TITLE		☐ DELETE	3.1 TITLE	 -	☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	•	•	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 CfTY-ST-ZIP		
TITLÉ		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS		•	5.3 STREET ADDRESS		}
CITY-ST-ZIP			5.4 CITY-ST-ZIP	_	
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ANNUESS	}		6.3 STREET ADDRESS	•	

CITY-ST-ZIP 14. I 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 with all other like empowered.

6.4 CITY-ST-ZIP

CR2E034.(11/98)