

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 27, 2002 8:00 am**  
**Secretary of State**

05-27-2002 90376 049 \*\*\*150.00

**DOCUMENT # 327576**

1. Entity Name

**ENGINEERED FINISHES INC**

Principal Place of Business

**921 NORTHWEST FIRST STREET  
 FT LAUDERDALE FL 33311**

Mailing Address

**921 NORTHWEST FIRST STREET  
 FT LAUDERDALE FL 33311**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-1205562**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

**THALER, CARL H.  
 8721 S.W. 51ST COURT  
 COOPER CITY FL 33328**

7. Name and Address of New Registered Agent

Name  
**Gary Thaler**

Street Address (P.O. Box Number is Not Acceptable)  
**921 N.W. First Street**

**Fort Lauderdale, FL 33311**

City

**FL**

Zip Code

8. 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

*[Signature]*

**Gary Thaler President**

**4/30/02**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete  
 NAME **THALER, RICHARD**  
 STREET ADDRESS **9253 CHELSEA DRIVE S.**  
 CITY-ST-ZIP **PLANTATION FL**

TITLE **D** ☒ Delete  
 NAME **THALER, CARL**  
 STREET ADDRESS **8721 SW 51ST CT**  
 CITY-ST-ZIP **COOPER CITY FL**

TITLE **PD** ☐ Delete  
 NAME **THALER, GARY**  
 STREET ADDRESS **2805 EGRET WAY**  
 CITY-ST-ZIP **COOPER CITY FL**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VSD** ☒ Change ☐ Addition  
 NAME **Richard Thaler**  
 STREET ADDRESS **6117 NW 65th Ave**  
 CITY-ST-ZIP **Lauder hill, FL 33319**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **PTD** ☒ Change ☐ Addition  
 NAME **Thaler Gary**  
 STREET ADDRESS **5734 N.W. 48th Drive**  
 CITY-ST-ZIP **Coral Springs, FL 33067**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

**GARY THALER**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/30/02**  
 Date

**954-455-467-3302**  
 Daytime Phone #

CR2E034 (9/01)