

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 04, 2006 8:00 am
Secretary of State

05-04-2006 90224 040 ***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

1st MOORE

CR2E034 (10/05)

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, GARY
921 N.W. FIRST ST.
FORT LAUDERDALE FL 33311

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE VSD ☐ Delete
NAME THALER, RICHARD
STREET ADDRESS 6117 NW 65TH AVE.
CITY-ST-ZIP LAUDERHILL FL 33319

TITLE PTD ☐ Delete
NAME THALER, GARY
STREET ADDRESS 5734 NW 48TH DRIVE
CITY-ST-ZIP CORAL SPRINGS FL 33067

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VSD ☒ Change ☐ Addition
NAME Thaler Richard
STREET ADDRESS 901 Hickory Trace Drive
CITY-ST-ZIP Jasper, AL 35504

TITLE PTD ☒ Change ☐ Addition
NAME Gary Thaler
STREET ADDRESS 1249 SW Melrose Ave
CITY-ST-ZIP Port St. Lucie, FL 34953

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/25/06 954-467-3302