

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 359567 (5)

1. Corporation Name

GENERAL CAULKING & COATINGS CO., INC.



Principal Place of Business

20444 NE 15 CT
MIAMI FL 33179

Mailing Address

20444 NE 15 CT
MIAMI FL 33179

2. Principal Place of Business

2a. Mailing Address

21

State, Apt. #, etc.

26

State, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**ANDREWS, HORACE, JR
13320 SW 16 CT
DAVIE FL 33325**

3. Date Incorporated or Qualified

02/11/1970

3a. Date of Last Report

05/24/1995

4. FEI Number

59-1284060

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Numbers Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0525, Florida Statutes.

SIGNATURE

Signature of the person or firm designated as the registered agent

Signature of the Agent designated as registered agent

DATE

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

12.1 TITLE

TD
KANISTRAS, GEORGE

DELETE

12.2 NAME

605 CHAPMAN RD
OVIDO, FL 00000

12.3 STREET ADDRESS

12.4 CITY, ST, ZIP

12.5 TITLE

SD
KANISTRAS, GEORGE

DELETE

12.6 NAME

605 CHAPMAN RD
OVIDO, FL 00000

12.7 STREET ADDRESS

12.8 CITY, ST, ZIP

12.9 TITLE

PD
ANDREWS, HORACE S, JR

DELETE

12.10 NAME

13320 SW 16 CT
DAVIE, FL 00000

12.11 STREET ADDRESS

12.12 TITLE

VD
TOWNSON, TERRY

DELETE

12.13 NAME

5408 SEA BISCUIT RD
PALM BCH GRDN, FL 00000

12.14 STREET ADDRESS

12.15 CITY, ST, ZIP

12.16 TITLE

V
ENGELKE, MICHAEL

DELETE

12.17 NAME

6829 VERONESE ST.
CORAL GABLES FL

12.18 STREET ADDRESS

12.19 CITY, ST, ZIP

12.20 TITLE

DELETE

12.21 NAME

12.22 STREET ADDRESS

12.23 CITY, ST, ZIP

12.24 TITLE

12.25 NAME

12.26 STREET ADDRESS

12.27 CITY, ST, ZIP

12.28 TITLE

12.29 NAME

12.30 STREET ADDRESS

12.31 CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE

Change Addition

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY, ST, ZIP

13.5 TITLE

Change Addition

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY, ST, ZIP

13.9 TITLE

Change Addition

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY, ST, ZIP

13.13 TITLE

Change Addition

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY, ST, ZIP

13.17 TITLE

Change Addition

13.18 NAME

13.19 STREET ADDRESS

13.20 CITY, ST, ZIP

13.21 TITLE

Change Addition

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY, ST, ZIP

13.25 TITLE

Change Addition

13.26 NAME

13.27 STREET ADDRESS

13.28 CITY, ST, ZIP

13.29 TITLE

Change Addition

13.30 NAME

13.31 STREET ADDRESS

13.32 CITY, ST, ZIP

14. I do hereby certify that the information supplied on this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 promoter 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 an attached agent with an address.

SIGNATURE:

Horace S. Andrews, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HORACE S. ANDREWS, JR.

1/16/96

305 652 1020

Date

Telephone #

CR2E034 (12/95)