2007 FOR PROFIT CORPORATION

May 04, 2007 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # F05000002166 05-04-2007 90076 022 ***150.00 1. Entity Name SPECIALTY SURFACES INTERNATIONAL, INC. Principal Place of Business Mailing Address 1200 LIBERTY RIDGE ROAD, #100 1200 LIBERTY RIDGE ROAD, #100 WAYNE, PA 19087 WAYNE, PA 19087 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 04162007 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 23-3034819 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired . Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BLANTON, EDWIN F Street Address (P.O. Box Number is Not Acceptable) 810 THOMASVILLE ROAD TALLAHASSEE, FL 32303 Zip Code City FL 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 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 П After May 1, 2007 Fee will be \$550.00 Added to Fees Trust Fund Contribution. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE PCD TITLE Henry Julicher Henry Julicher Izoo Ciberty Ridge Dr #100 Wayne, PA 19087 EO/Director ☐ Change Addition ☐ Delete LEVINE, ELLIOT NAME NAME STREET ADDRESS 1200 LIBERTY RIDGE ROAD, #100 STREET ADDRESS CITY-ST-ZIP **WAYNE PA 19087** CITY-ST-ZIP Secretary Alexander Stacy Alexander Ridge Dr #100 Addition VΠ TITLE ☐ Delete TITLE Change CHESKIN, BRUCE NAME NAME STREET ADDRESS 1200 LIBERTY RIDGE ROAD, #100 STREET ADDRESS 1700 WayneRA 19087 CITY-ST-ZIP **WAYNE, PA 19087** CITY-ST-ZIP Delete TITLE STD TITLE Change ☐ Addition THOMSON, ROBERT NAME NAME STREET ADDRESS 1200 LIBERTY RIDGE ROAD, #100 STREET ADDRESS CITY-ST-ZIP **WAYNE, PA 19087** CITY-ST-ZIP Delete TITLE TITLE Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Channe ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 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

FILED