

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F59007 (7)

1. Corporation Name

SEAL-KRETE, INC.

FILED
Apr 23, 1996 08:00 AM
Secretary of State



Principal Place of Business

306 GANDY ROAD
AUBURNDAL FL 33823-8527
US

Mailing Address

310 GANDY RD. -
P.O. BOX 4527 -
AUBURNDAL FL 33823-8527

3. Date Incorporated or Qualified
12/18/1981

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 306 Gandy Raod

4. FEI Number
59-2153978

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Auburndale, FL

Zip Country

Zip 33823 Country USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SHUMATE, VICTOR O
704 OLD BERKLEY ROAD, NORTH
AUBURNDAL FL 33823

81 Name

82 Street Address (P.O. Box Number is 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 607.0505, Florida Statutes.

SIGNATURE Victor O. Shumate

04/15/96

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME SHUMATE, DAVID
STREET ADDRESS 329 W BRIDGERS AVE.
CITY-ST-ZIP AUBURNDAL FL

TITLE CDV
NAME SHUMATE, VICTOR O.
STREET ADDRESS 704 OLD BERKLEY ROAD, N.
CITY-ST-ZIP AUBURNDAL FL

TITLE TS
NAME SHUMATE, WANDA G.
STREET ADDRESS 704 OLD BERKLEY ROAD, N.
CITY-ST-ZIP AUBURNDAL FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with 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 receiver or trustee empowered to execute this report as required by Chapter 637, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Wanda G. Shumate
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/15/96 (941)967-1535

Date

Daytime Phone #

CR2E034 (12/95)