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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1996

J81307

DOCUMENT # ALL MARK PAVEMENT MARKING SYSTEMS.INC. Principal Place of Business Mailing Address P.O. BOX 290560 P.O. BOX 290560 **TAMPA FL 33687** TAMPA FL 33687 3. Date Incorporated or Qualified 07/06/1987 3a. Date of Last Report 02/14/1995 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 59-2828760 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 Country 8. This corporation has liability for intangible tax under s. 199.032, Zio Zip 🔀 Yes 🗌 No Florida Statutes 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name BORNSTINE, KAREN 82 Street Address (P.O. Box Number is Not Acceptable) 12522 U.S. 301 NORTH 83 THONOTOSASSA FL 33592 City Zip Code 85 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 Signuture, typied or printed name of registered agent and title if applicable (NO1E: Registered Agent signature required when reinstating) DATE (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. PTD DELETE Change Addition 1 1 THLE HILE BORNSTINE, KAREN E. **CR2E034** NAME 1.2 NAME 2816 PEMBERTON CREEK DR. STREET ADDRESS 1.3 STREET ADDRESS SEFFNER FL 1.4 CITY - ST - ZIP CHTY-ST-ZIP DELETÉ Change ☐ Addition 2 1 TITLE TIT, F BORNSTINE, EDDY A. 22 NAME 2816 PEMBERTON CREEK DR. 2.3 STREET ADDRESS STREET ADDRESS SEFFNER FL 2.4 CITY - ST - ZIP 011Y-S1-ZIF DELETE Change ☐ Addition 3 1 TITLE TOTALE 3.2 NAME NAME 3 3 STREET ADDRESS 5769 FLADDRESS 3 4 CiTY - ST - ZIP CHY-SI-ZIF DELETE Change Addition THEF 4.1 TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 011Y-ST-71P 4.4 CITY-ST-ZIP DELETE Change 5.1 TITLE Addition THE NAM: 5.2 NEME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CHY-\$1-7/P Change Addition DELETE TITLE 6 1 TITLE NAME 62 NAME STREET ACIDRESS **63 STREET ADDRESS** 64 CITY - ST - ZIP CHY-ST-7P

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. KARENI E. BORNSTINE PRESIDENT 813-986-5906