## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J83230

(9)

SUNCOAST AUTO STRIPING, INC.

FILED Apr 28 1997 8:00am Secretary of State

(96/6)

CR2E034

Principal Place of Business Mailing Address								
* ALAN S. GASSMAN 00 - 94TH STREET NORTH #305 ST PETERSBURG FL 33713-8539	% CRAIG P. MOC 100 - 34TH STRE	% CRAIG P. MOORE 100 - 34TH STREET NORTH #305 ST PEYERSBURG FL 33713-8537 US						
	US				3. Date Incorporated or Qualified 07/20/1987			
2. Principal Place of Business	2a. Mailing Addr	2a. Mailing Address			4. FEI Number		Applied Fo	ır
1	26				59-2826854		Not Applica	able
Suite, Apt. #, etc.	Suite, Apt. #	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	d
City & State	Cily & Stale	- <del> </del>			Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip Country	7ip <b>29</b>	ê '			8. This corporation has liability for in Florida Statutes	ntangible i Yes		j'
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent					
MOORE, CRAIG P.			81	Name 				
100 -34TH STREET NORTH, #305 ST. PETERSBURG FL 33713			82 Street Addr		ess (P.O. Box Number is Not Acceptab	le)		
			83					
			84	City		FL	85 Zip Code	
<ol> <li>Pursuant to the provisions of Sections 607 office or registered agent, or both, in the S agent. I am familiar with, and accept the c</li> </ol>	State of Florida, Such char	nge was authorize	d by	the corporati	oration submits this statement for the prion's board of directors. I hereby accep	urpose of t the appo	changing its register intment as registere	red od
SIGNATURE Signature, typed or printed name of registers	d agent and title if applicable	(NOTE: Register	ed Age	ent signature require	ed when reinstating)	DATE		

12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE. 1.1 TITLE Change noitibbA HOFMANN, SETH A. NAME 1.2 NAME 7728 - 17TH WAY NORTH STREET ADDRESS 1.3 STREET ADDRESS ST. PETERSBURG FL CITY-ST-ZIP 1.4 CITY - ST - ZIP TITLE DELETE 211114 Change Addition NAME HOFMANN, TONOAH D. 2.2 NAME 7728 - 17TH WAY NORTH STREET ADDRESS 2.3 STREET ADDRESS ST. PETERSBURG FL CITY-ST-ZIP 2.4 CITY-ST-7IP DELFTE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-7IP DELETE Change Addition TITLE 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 THLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-7/P DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 eath; 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. 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 eath; 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. I further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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. I further certify that the

SIGNATURE: To Sha hit HALL Him a with ITTO war to Hafmany V. thes. 813-527 5407