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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

K51189

(4)

INSUL-COAT, INC.

FILED
May 12 1998 8:00am
Secretary of State



					
Principal Plac		Mailing Address			
1952 BRENGL		1952 BRENGLE AVENU	E		
ORLANDO FL 32808 US		ORLANDO FL 32608 US			DO NOT WRITE IN THIS SPACE
44		50			3. Date Incorporated or Qualified
					12/09/1988
2. Principal Place of Business 2s. Mailing Address					4. FEI Number Applied For
21		26			65-0084871 Not Applicable
Sulte, Apt	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5 Certificate of Status Desired \$8.75 Additional
22		27			Fee Required
City & State	е	City & State			6. Election Campaign Financing \$5.00 May Be
23		28	1		Trust Fund Contribution
Zip	Country	Zip	Cou	ntry	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24	25 9. Name and Address of Curren	29	[30]		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
		r redistoren whent		81 Name	IV. Hallie Blid Addisos VI HER Degistered Ageilt
	EIN, LARRY J				
1952 Gr Engle avenue			{	82 Street	Address (P.O. Box Number is Not Acceptable)
CONTRACTOR OF STANDARD				83	
OR	LANDO FL 32808				
				84 City	FL 85 Zip Code
44 0	to the annihim of Carl and Carl	2 and C07 (C02 Chaids Die	utaa daa si		corporation submits this statement for the purpose of changing its registered
SIGNATURE	Signature, typed or printed name of registered are OFFICERS ANI		OTE: Bog stered	Agent signature	required when renistating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	11 111	LE	Change Addition
NAME	KLEIN, LARRY J.		1 2 NA	ME	
STREET ADDRESS	2050 ST. GEORGE AVE. ST.		1.3 ST	REET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL		1.4 01	Y-S1-Z(P	
TITLE		DELETE	2.1 111	LE	Change Addition
NAME			2.2 NA	ME	
STREET ADDRESS			2.3 \$1	REE1 ADDRESS	
CITY-ST-ZIP			2.4 CI	TY-ST-ZIP	
TITLE		DELETE	3.1 TIT	LF.	Change Addition
NAME			3.2 NA	ME	
STREET ADDRESS			3.3 \$1	reet address	
CITY-ST-ZIP		·····	3.4. CI	TY-ST-ZIP	
TITLE		☐ DELETE	4.1 TIT	LE	Change Addition
NAME			4. 2 N	AME	
STREET ADORESS			4.3 ST	REET ADDRESS	
CITY-ST-ZIP				Y-ST-ZIP	
TITLE		☐ DELETE	5.1 717	1	Change Addition
NAME			5 2 NA		
STREET ADDRESS			5.3 S1	REET ADDRESS	
CITY-ST-ZIP				Y-ST-ZIP	0.
TITLE	¥	☐ DELETE	6.1 TH		Change Addition
NAME	1 i .		6.2 NA		
STREET ADDRESS			6.3 ST	REET ADDRESS	
CITY-ST-ZIP			6.4 CIT	Y-ST-ZIP	

14. I hereby certify that the information supplied with the 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; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CICMATURE

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1-28-00