

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **L97000000591**

1. Entity Name
PURECOAT INTERNATIONAL, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 FEB 22 AM 8:44



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**3301 ELECTRONICS WAY
WEST PALM BEACH FL 33407**

Mailing Address
**3301 ELECTRONICS WAY
WEST PALM BEACH FL 33407-4620**

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0762285	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**TARONE, THEODORE T JR
C/O CHERRY & SPENCER PA
1665 PALM BEACH LAKES BLVD., SUITE 600
WEST PALM BEACH FL 33401**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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.

SIGNATURE **THEODORE T. TARONE, JR.** (NOTE: Registered Agent signature required when reinstating.) DATE 1/21/00

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM TOSI, LAURENCE A JR 3301 ELECTRONICS WAY WEST PALM BEACH FL 33407 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BOGNAR, GEORGE 3301 ELECTRONICS WAY WEST PALM BEACH FL 33407 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM DYANNE C. TOSI, Executrix of the Estate of Laurence A Tosi, Jr. 3301 Electronics Way West Palm Beach, FL 33407 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	300003161993-3 -03/08/00--01010--016 *****55.00 *****55.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *THEODORE T. TARONE, JR.* SIGNATURE REQUIRED 1-21-00 5761-844-0100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #

CR2E083 (9/99)