

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2003 8:00 am
Secretary of State

02-03-2003 90099 038 ***150.00

DOCUMENT # P00000114863

1. Entity Name
SMG COATINGS, INC.



Principal Place of Business
**436 SHEARER BLVD.
COCOA FL 32922**

Mailing Address
**3430 GREENVILLE ST.
COCOA FL 32926**

2. Principal Place of Business

3. Mailing Address

**641 Clearlake Rd
Suite, Apt. #, etc.
#3**

Suite, Apt. #, etc.

City & State
Cocoa, FL

City & State

Zip
32922

Country
USA

Zip

Country



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number
59-3690674

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STANLEY, FREDERIC JR.
1361 BEDFORD DR.
MELBOURNE FL 32940**

Name
Crystal Tillotson

Street Address (P.O. Box Number is Not Acceptable)

3430 Greenville St

City
Cocoa

FL

Zip Code
32926

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Crystal Tillotson**
Signature, typed or printed name of registered agent and title if applicable.

President
(NOTE: Registered Agent signature required when reinstating)

1-13-03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
TILLOTSON, CRYSTAL
3430 GREENVILLE ST.
COCOA FL 32926** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PVST
TILLOTSON, CRYSTAL
3430 GREENVILLE ST
COCOA FL 32926** ☐ Delete

TITLE
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☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Crystal Tillotson**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-13-03 **321-636-8779**

Date Daytime Phone #

CR2E034 (10/02)