## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: \_

## FILED Mar 06, 2006 08:00 AM Secretary of State

DOCUMEN 1 # PU1000046499  1. Entity Name PALM BEACH POWDER COATING, INC.							
Principal Place of Business 1313 S KILLIAN DRIVE LAKE PARK, FL 33403		Mailing Address 1313 S KILLIAN DRIVE LAKE PARK, FL 33403	<u> </u>		market (fact \$251), \$251   \$451	kanii Bibig Biii) Bibig ib	))# (#118#1 11 (##1
			01232006	No Chg-P	CR2E034 (11/		
D	O NOT WRITE	IN THIS SPA	CE	4. FEI Numbe 65-110			Applied For Not Applicable
	200 VIII.				of Status Desired	□ \$8.75 Fee Rec	Additional priced
6. Name and Address of Current Registered Agent  KLEIN, GABRIELE  1313 S KILLIAN DRIVE  LAKE PARK, FL 33403			الله المعلمات المادي المعلمات المعلمات المعلمات المعلمات المعلمات المعلمات المعلمات المعلمات المعلمات المعلمات المعلمات المعلمات ا	As and has intra-accepted	NOT WI		
CANE PAR	sk, FL 33403			IN 7	THIS SP	ACE	e ga sa manan ingalaka Tangan Tangan ingan
	named entity submits this statement for toons of registered agent.	he purpose of changing its register	ed office or register	red agent, or bot	in the State of Flori	da. I am familiar v	vith, and accept
SIGNATURE_	Signature, typed or printed name of registated agent en	I this if applicable. (NOTE: Registers	ed Agent signature required	1 when reinstaling)		DATE	
	E NOW!!! FEE IS \$150.00 by 1, 2006 Fee will be \$550.00	Election Campaign Final Trust Fund Contribution.		.00 May Be led to Fees	000000 -03/16/06	456457 20028-004	150,00
10.	OFFICERS AND D	RECTORS		Landsparker (1800)	eganataineasida viilian	A your discount for the	Control of the control of
NAME STREET ADDRESS ETTY-ST-ZIP	KLEIN, GABRIELE 1313 S KILLIAN DRIVE LAKE PARK, FL 33403					Company of the Compan	
nice Name Street address City-St-Zip	PTO KLEIN, GABRIELE 1313 S KILLIAN DRIVE LAKE PARK, FL 33403			Andreas conduction		Annual of the state of the stat	
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TITLE NAME STREET ADDITESS CITY-ST-ZIP			, 20 195	with the second		A SECOND CONTRACT	garan kalendar († 1969) Samuel Marian († 1988)
	certify that the information supplied with the on this report or supplemental report is to poration or the receiver or trustee empoyer or on an attachment with an address, with	is filing does not quality for the ex- e and accurate and that my signa- gred to elecute this report as requi- hall other like empowered.	emptions contained ture shall have the ired by Chapter 607	i in Chapter 119 same legal effec 7, Florida Statute	Florida Statutes. I fut testif made under oas; and that my name	inther certify that if th, that I am an off appears in Block	ne information icer or director IO or Block 11 if