

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000131308

Entity Name: U.S. FOAM & COATINGS, INC.

FILED
Nov 21, 2005
Secretary of State

Current Principal Place of Business:

2303 WEST MCNAB ROAD
SUITE 16
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

2303 WEST MCNAB ROAD
SUITE 16
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 06-1712896

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCCULLOUGH, STEPHEN D CLA
1301 EAST OAKLAND PARK BLVD.
FT. LAUDERDALE, FL 33334 US

Name and Address of New Registered Agent:

MCCULLOUGH, STEPHEN D CLA
1301 EAST OAKLAND PARK BLVD
FT. LAUDERDALE, FL 33334 US

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: STEPHEN D MCCULLOUGH

11/21/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PVPS () Delete
Name: MCKENZIE, RICHARD
Address: 2303 W. MCNAB RD., STE. 16
City-St-Zip: POMPANO BEACH, FL 33069

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TR (X) Change () Addition
Name: MCKENZIE, RICHARD
Address: 2303 WEST MCNAB ROAD, SUITE 16
City-St-Zip: POMPANO BEACH, FL 33069

Title: VP () Change (X) Addition
Name: POLO, FRED
Address: 4861 SW 21ST AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33317

Title: PRES () Change (X) Addition
Name: KAPLAN, ROBERT N
Address: 2303 WEST MCNAB ROAD, SUITE 16
City-St-Zip: POMPANO BEACH, FL 33069

Title: SEC () Change (X) Addition
Name: KAPLAN, ROBERT N
Address: 2303 WEST MCNAB ROAD, SUITE 16
City-St-Zip: POMPANO BEACH, FL 33069

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT N. KAPLAN

PRES

11/21/2005

Electronic Signature of Signing Officer or Director

Date