

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000131308

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

FILED  
Jan 26, 2007  
Secretary of State

## Current Principal Place of Business:

902 SW 2ND PLACE  
POMPANO BEACH, FL 33069

## New Principal Place of Business:

## Current Mailing Address:

902 SW 2ND PLACE  
POMPANO BEACH, FL 33069

## New Mailing Address:

FEI Number: 06-1712896

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## 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  
2702 A WEST OAKLAND PARK BLVD  
FT. LAUDERDALE, FL 33311 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

01/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: TR ( ) Delete  
Name: MCKENZIE, RICHARD  
Address: 902 SW 2ND PLACE  
City-St-Zip: POMPANO BEACH, FL 33069

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

Title: PRES ( ) Delete  
Name: KAPLAN, ROBERT N  
Address: 902 SW 2ND PLACE  
City-St-Zip: POMPANO BEACH, FL 33069

Title: SEC ( ) Delete  
Name: KAPLAN, ROBERT N  
Address: 902 SW 2ND PLACE  
City-St-Zip: POMPANO BEACH, FL 33069

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TR (X) Change ( ) Addition  
Name: KAPLAN, ROBERT N  
Address: 902 SW 2ND PLACE  
City-St-Zip: POMPANO BEACH, FL 33069

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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

01/26/2007

Electronic Signature of Signing Officer or Director

Date