

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

9/24/2004-90002-019-\$158.75-\$158.75

1002

DOCUMENT # P03000136637

1. Entity Name

M.G. Metal Coatings & Lubricants Inc



FILED

04 OCT 22 PM 2:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4045 Melanie Street

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 292

Suite, Apt. #, etc.

Palatka

REINSTATEMENT

DO NOT WRITE IN THIS SPACE

10/25/04

City & State

Hastings Florida

City & State

Palatka Florida

4. FEI Number

16-1687684

Applied For

Not Applicable

Zip

32145

Country

U.S.A

Zip

32178

Country

U.S.A

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name: Michael Grappone

Street Address (P.O. Box Number is Not Acceptable): 4045 Melanie Street

City: Hastings

FL

Zip Code

32145

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

Michael Grappone

Signature, typed or printed name of registered agent and UBR is applicable

(NOTE: Registered Agent signature required when reinstating)

10-20-04

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE: President / owner T+S
NAME: Michael Grappone
STREET ADDRESS: 4045 Melanie St.
CITY-ST-ZIP: Hastings FL 32145

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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Michael Grappone

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-20-04, 386-3264312

Date

Daytime Phone #

CR2E034B (12/02)

2 of 2

To Whom it may concern;

Hi my Michael Grappone, I recieved this post card, and called your office. I was told since this the one I recieved to pay 150 dollars. The person who was a woman said they would not charge me a late fee. I then tried to pay on line but due to the storms everything was closed. Your office changed the deadline to oct. Next i filed the u.b.r and enclosed a check for 158.75; Then I got this letter and called again. This time i spoke to a nice fellow who told me to write this letter n mail back the paper n post card. Thank You for your time. I've had alot of problems with my mail here and have since built a metal mailbox that locks. I also have the P.O. Box.

Michael Grappone
