

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000165767

Entity Name: SLS SURFACE COATINGS, INC.

FILED  
Apr 17, 2006  
Secretary of State

## Current Principal Place of Business:

5128 ISLAND DATE ST  
SARASOTA, FL 34232 US

## New Principal Place of Business:

## Current Mailing Address:

5128 ISLAND DATE ST  
SARASOTA, FL 34232 US

## New Mailing Address:

FEI Number: 20-1978129

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BAKER, MICHAEL L  
5702 CLARK ROAD  
SARASOTA, FL 34233 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: SCOTT, SHAWN  
Address: 5128 ISLAND DATE ST  
City-St-Zip: SARASOTA, FL 34232 US

Title: VPSD ( ) Delete  
Name: SCOTT, VERONICA  
Address: 5128 ISLAND DATE ST  
City-St-Zip: SARASOTA, FL 34232 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SHAWN SCOTT

OWNE

04/17/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date