

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000116912

FILED
Aug 30, 2008
Secretary of State

Entity Name: DURASEAL OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

5600 N. FLAGLER DR., SUITE 908F
W. PALM BCH, FL 33407

New Principal Place of Business:

5600 N. FLAGLER DR., SUITE 908F
908
W. PALM BCH, FL 33407

Current Mailing Address:

5600 N. FLAGLER DR., SUITE 908F
W. PALM BCH, FL 33407

New Mailing Address:

5600 N. FLAGLER DR., SUITE 908F
908
W. PALM BCH, FL 33407

FEI Number: 22-3970818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WALLIS, DAVID
Address: 5600 N. FLAGLER DR., SUITE 908F
City-St-Zip: W. PALM BCH, FL 33407

Title: S () Delete
Name: WALLIS, JOHN
Address: 5600 N. FLAGLER DR., SUITE 908F
City-St-Zip: W. PALM BCH, FL 33407

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 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: DAVID C. WALLIS

PD

08/30/2008

Electronic Signature of Signing Officer or Director

Date