**FILED** 

Mar 17, 1999 8:00 am Secretary of State

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## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000013640

1. Corporation Name

INDUSTRIAL ENVIRONMENTAL COATINGS CORPORATION

Principal Place	of Business	Mailing Address		- 1 1991/590 tre zuige nien gebit gebit gebit gebit gebet trees diese gien deut gest
1831 BLOUNT RD		1831 BLOUNT RD		•
STE B		STE B		DO NOT WRITE IN THIS SPACE
POMPANO BEACH FL 33069 US		POMPANO BEACH FL 33069 US		3. Date Incorporated or Qualifed
03		00		02/22/1993
a Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number Applied For
<del>-</del>	ace of business	26		65-0396213 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		_ \$8.75 Additional
22		27		5. Certificate of Status Desired - Fee Required -
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip Country		Zip	Country	8. This corporation owes the current year Intangible
24	25	29 30	o	Personal Property Tax.   ☐ Yes ☐ No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered Agent
			81 Name	
MELI, THERESA 2401 SE 8TH CT		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
POMPANO BCH. FL 33062			83	
r O W	ANO BOTI. TE SOUR		63	
			84 City	FL 85 Zip Code
		20 - 1 007 4500 Florida Statuta	the above period com	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered				
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				
SIGNATURE		MOTE: Br	egistered Agent signature require	ed when reinstation) DATE
12.	Signature, typed or printed name of registered age	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PT	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	MELI. RICHARD		1.2 NAME	
STREET ADDRESS	2515 NE 7 PLACE		1.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CITY-ST-ZIP	
TITLE	VS	☐ DELETE	2.1 TITLE	Change Addition
NAME	MELI JR, PAUL I	1	2.2 NAME	
STREET ADDRESS	.2401.SE 8 COURT		2.3 STREET ADDRESS	. · ·
CITY-ST-ZIP	POMPANO BEACH FL		2. 4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS		l	3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CfTY-ST-ZIP	Character Charac
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME.			4, 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	5.1 TITLE	
NAME	,		5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP		O BELETE	5.4 CITY-ST-ZIP 6.1 TITLE	☐ Change ☐ Addition
TITLE	10, 10, 10, 10, 11, 11, 11, 11, 11, 11,	☐ DELETE	6.2 NAME	onlings
NAME 5	5 10 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		6.3 STREET ADDRESS	
I STREET ADORESS			S.S. G. M.C.E. I. MODINE.CO.	

14. 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 annual report or supplemental annual 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 12 or Block 13 if chapted, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

**SIGNATURE:** 

MAR. 15, 1999