AMOUNT DUE	NOTICE: CORPORATION WILL E ON OR BEFORE 8/7/96: \$225 (IF DIS	SE DISSOLVED SOLVED, MINIM	ON OR AFTER . UM AMOUNT DU	AUGUS E TO REI	T 7, 1 Instat	1996. TE: \$ 375.)				
PROFIT CORPORATION ANNUAL REPORT 1996 FLORIDA DEPARTM Sandra B. I Secretary DIVISION OF CO					am to	-				
DOCUN 1. Corporation	MENT # P9300	000744	162 (1)							
•	POWDER COATINGS INC		. ,							
Principal Place of Business Mailing Address										
4701 NW 165 STREET HALEAH FL 33014			4701 NW 165 STREET HIALEAH FL 33014							
		···					3. Date Incorporated or Qualified 10/21/1993	1 '	le of Last Report /17/1995	
2. Principal Pl	ace of Business	2a. Mailir	2a. Mailing Address				4. FEI Number 65-0445292		Applied Not App	
Suite, Apt	t, etc		Suite, Apt. #, etc				5. Cerlificate of Status Desired		\$8.75 Addition	onal
3		City 8	City & State				6. Election Campaign Financing Trust Fund Contribution		\$5.00 May E Added to Fee	
Z _{(p}	25	29		30 Cou	untry		This corporation has liability for Florida Statutes	Yes [No	32.
28 Zip Country Zip 29 9. Name and Address of Current Registered Agent STUBBS, DENVER 4701 NW 165 STREET HIALEAH FL 33014				81	Name	10. Name and Address of New Re	gistered A	gent		
47	01 NW 165 STREET				82	Street Add	ress (P.O. Box Number is Not Acceptat	ıle)		
HL	ALEAH FL 33014				83					
					84	City			85 Zip Code	
unice or re	igistereo agent, or both, in the stati	e or rionda. Suci	n change was au	anonzec	oove-n	oppod occo	oration submits this statement for the pi on's board of directors. Thereby accept	rpose of c		ered ed
SIGNATURE .	mammar with, and accept the oblig	gations of, Section	11 607.0505, Fide	ida Stat	utes					
12.	Signature, typod or ponted name of registered as OFFICERS A	pert and title 1 applical ND DIRECTORS	110A) 34	Hog stere	kl Agent	signature requi	ed when remitating) ADDITIONS/CHANGES TO OFFIC	DAIL CERS AND	DIRECTORS IN 1;	<u>ي</u> ا
TITLE	D		DELETÉ	111					Change #	Add:tion
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NAME				22 N						
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STREET ADDRESS				535	IREET AC	DDRESS				
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NAME			L DECEIG	61 TI 62 N				L.	Change (A	Addition
STREET ADDRESS					FREET AL	DDRESS				

CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 1 19 07(3)(k). Florida Statutes 1 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 617, Florida Statutes, and that my name appears in Block 17 or Block 13 if changed, or organ attachment with an address

SIGNATURE: X JULIUM SIGNATURE AND TYPED OR PRINTER NAME OF SIGNING OFFICER OR DIRECTOR