SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996 DOCUMENT #

1. Corporation Name P93000078093 (0) SURFACE TECH, INC.



JUIN AC	L (CON) INO.								
Principal Place	ailing Address					1 44111 1848	is latte Catif etite ern en at		
704 TOLEDO PLACE BRANDON FL 33511			P.O. BOX 1965 BRANDON FL 33509-1965 US			3. Date Incorporated or Qualified		ate of Last Report	
							11/05/1993	06	/20/1995
2. Principal Pla	on of Rusiness	2a.	Mailing Address				4. FEI Number		Applied For
Z. Principar Flace di Dusinessi			26			03 02 10 100		Not Applicable	
Suite, Apt #	, etc.	27	Suite, Apt #, etc				5. Certificate of Status Desired	X	\$8.75 Additional Fee Required
City & State			City & State		_		6. Election Campa gn Financing	$\Box$	\$5.00 May Be
23		28	•				Trust Fund Contribution		Added to Fees
Zip	Country		Zip	<b>—</b>	untry		8. This corporation has liability for Florida Statutes	intangible ] Yes [	tax under s. 199 032.
24	25	29	4.4	30			10. Name and Address of New Re		
	9. Name and Address of Curren	Regi	stered Agent		Bi	Name	10. 1101110	¥	
HAN	INA, MARGARET				L				
704 TOLEDO PLACE						Street Address (P.O. Box Number is Not Acceptable)			
BRANDON FL 33511			63						
					84				. 85 Zip Code
						1		FI	
agent lar	to the provisions of Sections 607 050 agistered agent, or both, in the State in familiar with, and accept the obligation Signature typical or profed base of registered age	ations (	of, Section 607.0505, Flo	orida Sta	atutes	<b>.</b>	poration submits this statement for the plant is board of directors. Thereby acceptant when releasing	DAS	
12.	OFFICERS AN		ECTORS	13			ADDITIONS/CHANGES TO OFFI	JEHS AN	Change Addition
TITLE	<b>DPST</b> DELETE			. I	1.1 TITLE				
NAME	HANNA, MARGARET			1 1	NAME				
STREET ADDRESS	704 TOLEDO PLACE		13 STREET ADDRESS					ŀ	
CITY-ST-ZIP	BRANDON FL 33511				1.4 CITY - ST - ZIP				Change Addition
TITLE	DELETE			2 1 TITLE					
NAME					2 NAME	1			
STREET ADDRESS				_		TADDRESS			
CITY - ST - ZIP	DELETE				2 4 City - ST - 2IP 3 1 TITLE			<i>-</i>	Change: Addition
TITLE	[_] beter		1	3.2 NAME					
NAME	ļ					ET ADDRESS			
STREET ADDRESS						- ST - ZIP			
CITY-ST-ZIP	DELETE				1 TITLE		Change		Change Addit-as
TITLE				1	2 NAM	1			
NAME	(					ET ADDRESS			
STREET ADDRESS						-ST-ZIP			
CITY - ST - ZIP			DELETE		1 71717				Change Addition

14. I do hereby certify that the information supplied with this fring is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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 further certify 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 13 if changed, or on an attachment with an address 64 CITY - ST - ZIP

52 NAME 5 3 STREET ADDRESS

61 TITLE

62 NAME 6.3 STREET ADDRESS

54 CITY - ST - ZIP

SIGNATURE:

TITLE

TITLE

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

DELETE

DELETE

6/15/96 (813) 681-6399

Change Addition