

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000080939

**FILED**  
**Jan 27, 2007**  
**Secretary of State**

**Entity Name:** SURFACE RESTORATORS/BENCHMARK, INC.

**Current Principal Place of Business:**

16223 HODZA STREET  
MASARYKTOWN, FL 34604 US

**New Principal Place of Business:**

11259 GODWIT AVENUE  
WEEKI WACHEE, FL 34613 US

**Current Mailing Address:**

PO BOX 1398  
LAND O LAKES, FL 34639 US

**New Mailing Address:**

**FEI Number:** 59-3211924      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LECZNAR, ROBERT H  
5922 MAIN STREET  
NEW PORT RICHEY, FL 34652 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: D ( ) Delete  
Name: BOATWRIGHT, WILLIAM H  
Address: 16223 HODZA STREET  
City-St-Zip: MASARYKTOWN, FL 34604 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: MILLER, STEVEN T  
Address: 11259 GODWIT AVENUE  
City-St-Zip: WEEKI WACHEE, FL 34613 US

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: STEVEN T. MILLER

PRES

01/27/2007

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

\_\_\_\_\_  
Date