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CORPORATION
ANNUAL REPORT
1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY 25 PM 12: 18

DOCUMENT # **P93000082644 (4)**

1. Corporation Name
NU LOOK SURFACE SYSTEMS, INC.

Principal Place of Business
711 FLOUCHESTER ST.
BOCA RATON FL 33487
US

Mailing Address
711 GLOUCHESTER ST.
BOCA RATON FL 33487
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 12/02/1993
3a. Date of Last Report: 05/10/1994

2. Principal Place of Business
21 741 Forsyth St.
Suite, Apt. #, etc.
22
City & State
23 Boca Raton
Zip 24 33487
Country 25 USA

2a. Mailing Address
26 741 Forsyth St.
Suite, Apt. #, etc.
27
City & State
28 Boca Raton
Zip 29 33487
Country 30 USA

4. FEI Number: 65-0465538 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent
BARRIER, TONY C.
711 GLOUCHESTER ST.
BOCA RATON FL 33487

10. Name and Address of New Registered Agent
81 Name: Tony C. Barrier
82 Street Address (P.O. Box Number is Not Acceptable): 741 Forsyth St
83
84 City: Boca Raton FL 85 Zip Code: 33487

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: Tony C. Barrier
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P ☒ Change ☐ Addition
NAME	BARRIER, TONY C.	1.2 NAME	Barrier, Tony C.
STREET ADDRESS	711 GLOUCHESTER ST.	1.3 STREET ADDRESS	741 Forsyth St
CITY - ST - ZIP	BOCA RATON FL	1.4 CITY - ST - ZIP	Boca Raton FL 33487
TITLE		2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing 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 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 changed, or on an attachment with an address.

SIGNATURE: Tony C. Barrier — 5/22/95 — 407 998 9776
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

0280344 CP