FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS **DOCUMENT #** P94000010227 (A)

T & C CREATIVE COATINGS INC. Principal Place of Business 7061 S TAMIAMI TRAIL SUITE 204 SARASOTA FL 34231 SOURCE COATINGS INC.								
2 Principal F	Place of Busine					 Date Incorporated or Qualified 01/31/1994 	3a. Date of Las 05/01/	Report 1995
21			2a. Mailing Address	2a. Mailing Address 26			Applied For	
Suite, Apt. #, etc			Suite, Apt. #, etc.				Not Applicable	
City & Stat	· · · · · · · · · · · · · · · · · · ·		27	· · · - · · · · · · · · · · · · · · · ·		5. Certificate of Status Desired		75 Additional e Required
23	i.e		Orly & State	City & State		6. Election Campaign Financing	\$5.00 May Be	
Zip Country		- Z _I ;	Country		Trust Fund Contribution		led to Fees	
4 25		29	30		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes			
	9. Name a	and Address of Cur	rrent Registered Agent			10. Name and Address of New Re		
GARDI,	. LES			8	Name			
7061 S TAMIAMI TRAIL				82 Street Addr		ress (P.O. Box Number is Not Acceptable	e)	·
SUITE	204			83	83			
SARASOTA FL 34231					84 City			
11 Dure toot	to the man	- 7.5			1,		FL 85	Zip Code
SIGNATURE _		printed frame of registered in		II. Brigatesia Agr			DATE	
TITLE	P -FAIRLY, C. TODD -5050 OCEAN BLVD -SARASOTA FL		DECETE	1 1 TITLE		ADDITIONS/CHANGES TO OFFIC		ORS IN 12
NAME CERSON ADDRESS				1.2 NAMe			☐ Change	ORS IN 12 Addition
STREET ADDRESS CITY+ST-ZIP			····	1.3.5.(PEE	ADDRESS			
TITLE	V	T-100 51		14 CHY 5	ST - ZIP			i
NAME			C) preen	2.1 Till 5			☐ Change	Addition
STREET ADDRESS				2.2 NAME 2.3 STHLET ADDRESS				
CITY - ST - ZIP	SARASOTA FL			2.4 CHY -ST-ZIP				
TITLE NAME	1		DELETE	DELETE 3 1 TIPLE			Change	Addition
STREET ADDRESS				3.2 NAME			EJ ondige	C Addition
OTY-ST-ZIP				33 STHEET	ADDRESS			ĺ
TIFLE			☐ DELETE	3 4 CITY - S	1 - 21f			
LAME			C) pereit	4 1 THILE		Change Addition		Addition
TREET ADDRESS				4.2 NAME				
11Y - \$1 - ZIP				4.3 STREET				
ITLE			DELETE	5 1 TITLE				
AMF				5 2 NAME			☐ Change	☐ Addition
TREET ADDRESS				53STPEET.	ADDRESS			
ITY-ST-ZIP				5.4 CITY ST	ļ]
TLE			☐ DELETE	6 I TITLE			Change	Addition
AME DEET ADDRESS				6.2 NAME			□ c.rauñe	Addition
TY-ST-ZIE				63 STREET A	IDDAESS			
FER - ST. 7(D)				_				

64 CITY-ST-ZIP

14. Ido hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(4), 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

4/36/96

(941)497 2829