## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

410 A SHEARER BLVD COCOA FL 32922-7250

C/O DYNAMIC POWDER COASTING

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

410 A SHEARER BLVD

SIGNATURE:

COCOA FL 32922

C/O DYNAMIC POWDER COATING



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 07 1997 8:00am

Secretary of State

3. Date Incorporated or Qualified 3a. Date of Last Report

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # **P94000038572** (1)

D.D. PIERSON ENTERPRISES, INC.

						05/18/1994	03	/14/1996	
2. Principal	Place of Business	2a. Mailing Address	a. Mailing Address			4. FEI Number		Applied For	
21		26	3			59-3245098		Not Applicable	
Suite. Ap	ot #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			F. O. W. A. J. Obel and Declarate		\$8.75 Additional	
22		27				5. Certificate of Status Desired	, L	Fee Required	
City & St	tate	City & State	City & State			6. Election Campaign Financir	10	\$5.00 May Be	
23		26				Trust Fund Contribution		Added to Fees	
Ζιρ	Country	Zip	p Cou			8. This corporation has liability	for intangible	le tax under s. 199.032.	
24	25	29	30			Florida Statutes		□ No	
Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent			
PIERSON, DERALD D 1525 BELLA CASA CT. MERRITT ISLAND FL 32952				81	Name				
				82 Street Address (P.O. Box Number is Not Acceptable)					
				62	Siledi Address (F.O. box Nullider is Not Acceptable)				
				83				· · · · · · · · · · · · · · · · · · ·	
				84	City		FL	85 Zip Code	
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									
Signature: typed or printed name of registered agent and ticle if applicable (NOTE: Registere  12. OFFICERS AND DIRECTORS 13.					t signature required		DATE	In Dipperson in the	
12.	PTD OFFICERS AIN	DELETE	13		- 1	ADDITIONS/CHANGES TO C	IFFICENS AN		
NAME:	PIERSON, DERALD D	L_J DECERE		TITLE				Change Addition	
	1525 BELLA CASA CT.			1.2 NAME					
SIREET ADORES	MERRITT ISLAND FL			1.3 STREET ADDRESS				*	
CITY ST ZIP				1.4 CITY - ST - ZIP					
TITLE	- <del>-</del>			2.1 TATLE				Change Addition	
NAME	EASTERLY, DWIGHT			2.2 NAME					
STREET ADDRES.				STREET A	ADDRESS				
CITY-ST-ZIP	MERRITT ISLAND FL			2. 4 CITY - ST - ZIP					
TITLE	SD DELETE			3.1 THILE			•	Change Addition	
NAME				3.2 NAME					
STREET ADDRES				STREET	ADDRESS				
CITY-ST-ZIP				3.4. CITY - ST - ZIP					
TOTLE	DELETE		4.1	4.1 TITLE				Change Addition	
NAME			4. 2	NAME				•	
STREET ADDRES	S.		4.3	STREET A	ADDRESS				
CHY-ST ZIP			CITY-ST	- ZIP					
THLE		DELETE 5.		5.1 TITLE				Change Addition	
NAME			5.2	NAME					
STREET ADDRES	is	5.3		STREET	ADDRESS	*.			
ĞITY - ST - ZIP	5.4		CITY-ST	- ZIP	•				
TITLE				TITLE		i.		Change Addition	
NAME	1		6.2	NAME					
STREET ADDRES			6.3	6.3 STREET ADDRESS			i.		
C(T):- S7 - Z(P)			6.4 CITY		1				
14. I do hei	reby certify that the information supplie	d with this filling does not qua	lify for the	e exer	notion stated	in Section 119.07(3)(i), Florida Sta	atutes. I furth	er certify that the	
information indicated on trips 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 farm an efficer or oriector if the corporation or the receiver or bustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name									
appears in Block 12 or Edock 13 if changed, or officen attachment with an address.									