## ,2096 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 22, 2006 08:00 A DOCUMENT # P94000087497 **Secretary of State** HITECH REFINISHING INC. Mailing Address Principal Place of Business 13402 N.W. 10TH STREET 13402 N.W. 10TH STREET SUNRISE, FL 33323 SUNRISE, FL 33323 CR2E034 (11/05) No Chg-P 03202006 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0542103 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE BREMSER, WARREN G 13402 N.W. 10TH ST. SUNRISE, FL 33323 IN THIS SPACE 3. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS IIIIFNAME BREMSER, BETTY 04/**08/08/48/18/3** STREET ADDRESS 13402 NW 10TH ST. CITY-ST-ZIP SUNRISE, FL 33323 PTD TITLE BREMSER, WARREN G NAME STREET ADDRESS 13402 NW 10TH ST. CITY-ST-ZIP SUNRISE, FL TITLE COLEMAN, MICHAEL NAME STREET ADDRESS 20822 NW 14TH COURT DO NOT WRITE PEMBROKE PINES, FL 33029 CITY-SI-ZIP IN THIS SPACE 7373 F STREET ADDRESS CITY-ST-212 TITLE NAME STREET ADDRESS CITY-ST-ZIP Tជា F NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Daytime Phone #