


**2007 FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 31, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P95000041435</b>	
1. Entity Name <b>AMERICAN SEED &amp; COATING TECHNOLOGY, INC.</b>	
	
Principal Place of Business <b>3379-B SW 42ND AVENUE PALM CITY, FL 34990 US</b>	Mailing Address <b>PO BOX 1866 PALM CITY, FL 34991 US</b>
<b>DO NOT WRITE IN THIS SPACE</b>	



01092007 No Chg-P CR2E034 (11/05)

4. FEI Number <b>65-0587531</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>KAUFMAN, GLEN D 3839 SW WHISPERING SOUND DR. PALM CITY, FL 34990</b>	<b>DO NOT WRITE IN THIS SPACE</b>
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8. 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

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP TRIAS, JOSEP 2017 SW MOORING DR PALM CITY, FL 34990
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVTS KAUFMAN, GLEN D 3839 SW WHISPERING SOUND DR. PALM CITY, FL 34990
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02/05/07-80037-007 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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:**  **GLEN KAUFMAN** 4/11/07 772 221 0653  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #