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

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

11631 EVEROREEN STREET

FOUNTAIN FL 32438-2792

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

2. Principal Place of Business

11631 EVERGREEN ST

Suite Ant # etc

22

FOUNTAIN FL 32438



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000067202 (8)

JOHN MOCK WATERPROOFING & COATINGS, INC.

23		Oity & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zφ	Country	Zip	(Country		8. This corporation has liability for intangible tax under s. 199.032	
24	25 29		30			Florida Statutes	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD				81	Name		
343 ALMERIA AVENUE CORAL GABLES FL 33134				82 Street Ad		ldress (P.O. Box Number is Not Acceptable)	
				83			
				84	City	FL 85 Zip Code	
11. Persuant office or r	to the provisions of Sections 607.050	2 and 607.1508, Fig of Florida, Such ch	orida Statutes, the	above	e-named co	propriation submits this statement for the purpose of changing its register ration's board of directors. I hereby accept the appointment as registered	
agent La	ni fam lar with, and accept the oblig	alions of, Section 60	07.0505, Florida 8	Statutes	3.	station of board of directors. Frictionly accept the appointment as registered	
SIGNATURE	Styruture typed or profest ment of registered ag	mr and tile if apply able	(NOFF Regis	tered Age	n) signature rec	quired when reinstating) DATE	
12.		D DIRECTORS		3.	and the state of t	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
Title	PTD		DELETE 1	1 TITLE		☐ Change ☐ Addit	
NAME	MOCK, JOHN W		1	2 NAME		•	
STREET ADDRESS	11631 EVERGREEN STREET		1	.a STREET	ADDRESS		
C-1 r - S1 21P	FOUNTAIN FL 32438		1	4 CITY-S	T - ZIP		
Tillf	VSD			1 TITLE		Change Addit	
NAME:	MOCK, EMILIA W		2	2 NAME	1		
STREET ADDRESS	11631 EVERGREEN STREET				ADDRESS	5	
City - St - Zin	FOUNTAIN FL 32438			4 CITY-S			
THE				1 TITLE	<u> </u>	Change Addit	
NAME			3	2 NAME			
STREET ADDRESS					ADDRESS		
CHY-ST ZIP				4 CITY-S			
TIT.F				1 TITLE		Change Addit	
NAME			4.	2 NAME			
STREET ADDRESS			4	3 STREET	ADDRESS		
CITY S1-ZIP				4 CITY-S			
Dift				1 TITLE	1-211	Change Addit	
NAME		_		2 NAME	-	The state of the s	
STREET ADDRESS					ADDRESS		
City St-ZP				4 CHY-S			
TIFLE				1 TITLE		Change Additi	
NAME				2 NAME		trans Charles T. 1900	
STREET ADDRESS			1	3 STREET	ADDRESS		
City-S1-Zir				4 CITY-S			
14. I do bereh	by certify that the information supplie	d with this filing doe	e not qualify for t	ha avai	motion state	ed in Section 119.07(3)(i). Florida Statutes I further certify that the	
Intornatio	is increated on this annual report or s	iupplemental annua	l report is true an	id accu	rate and th	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the at my signature shall have the same legal effect as if made under oath, to ort as required by Chapter 607. Florida Statutes: and that my name.	

oln William Model The William Mock 5- 3 MAR FT DATE AND EXPED OR PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

FILED
Mar 05 1997 8:00am
Secretary of State

3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

(904)

Not Applicable

04/18/1996

3. Date Incorporated or Qualified

08/30/1995

59-3350512

5. Certificate of Status Desired

4. FEI Number