

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Montiam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000071433 (3)

1. Corporation Name

EASY LINER USA, INC.



Principal Place of Business

304 SOUTHEAST 30 STREET
CAPE CORAL FL 33904

Mailing Address

304 SOUTHEAST 30 STREET
CAPE CORAL FL 33904

2. Principal Place of Business

21 Suite, Apt., etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt., etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified
09/15/1995

3a. Date of Last Report

4. FEI Number

59-3334399

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name CHARLES A. CUCCHIARA

82 Street Address (P.O. Box Number is Not Applicable)
304 S.E. 30TH STREET

83

84 City CAPE CORAL

FL 85 Zip Code 33904

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 607.0506, Florida Statutes.

SIGNATURE

Charles A. Cucchiara

3-22-96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME PD CUCCHIARA, CHARLES A
STREET ADDRESS 304 SOUTHEAST 30 STREET
CITY-ST-ZIP CAPE CORAL FL 33904

TITLE ☐ DELETE
NAME VSD
NAME KUSSNER, PAUL
STREET ADDRESS 304 SOUTHEAST 30 STREET
CITY-ST-ZIP CAPE CORAL FL 33904

TITLE ☐ DELETE
NAME VTD
NAME BROOKS, ROBERT
STREET ADDRESS 304 SOUTHEAST 30 STREET
CITY-ST-ZIP CAPE CORAL FL 33904

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

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

SIGNATURE:

Charles A. Cucchiara

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Charles A. Cucchiara

3-22-96

941-772-9234

CR2E034 (12/95)