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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000071433 (3)

EASY LINER USA, INC.

Principal Place of Business

Mailing Address

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

27

28

29

304 SOUTHEAST 30 STREET CAPE CORAL FL 33904

2. Principal Place of Business

25

Suite, Apt. #, etc.

City & State

21

22

23

24

Ζip

304 SOUTHEAST 30 STREET CAPE CORAL FL 33904-3429

## FILED Apr 25 1997 8:00am Secretary of State



3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

03/26/1996

Yes No

8. This corporation has liability for intengible tax under s. 199.032,

3. Date Incorporated or Qualified

5. Certificate of Status Desired

Election Campaign Financing Trust Fund Contribution

09/15/1995

59-3334399

Florida Statutes

4. FEI Number

CUCCHIARA, CHARLES A 304 SE 30TH STREET CAPE CORAL FL 33904				81 Name						
				82 Street Address (P.O. Box Number is Not Acceptable)						
CAPE CONAL PL 33804			83							
			84	City		85	Zip Ço	do		
			_		FL	1		!		
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 Sign one system of printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling) DATE										
12. OFFICERS AND DIRECTORS I 13.										
300.5			LA TITLE			Char		Addition		
NAM!	CUCCHIARA, CHARLES A		1.2 NAME				•			
STHEFT ADDRESS	304 SOUTHEAST 30 STREET		1.3 STREET ADDRESS							
CITY - S1 - ZIP	CAPE CORAL FL 33904		1.4 CITY-ST-ZIP							
THIF	VSD DELETE		2.1 TITLE			Char	nge ]	Addition		
NAME	Kussner, Paul 304 Southeast 30 Street Cape Coral Fl 33904		2.2 NAME							
STREET ADORESS			2.3 STREET	address						
CITY-ST-7iP			2. 4 CITY - 9	1- ZIP						
TITLE	VTD 🔲	DELETE 3	3.1 TITLE			Chai	ige	Addition		
NAME	BROOKS, ROBERT 304 SOUTHEAST 30 STREET		3.2 NAME					ļ		
STREET ADDRESS			3.3 STAEET	address						
CHY-ST-ZIP	CAPE CORAL FL 33904		3.4. DITY-S	1-7iP						
TILLE		DELETE	1.1 TITLE			Chai	nge	Addition		
NAME		14	2 NAME							
STREET ADDRESS			4.3 STREET	address	,					
CHY-SI-7IP			1.4 CITY-S	T-ZIP						
1)TLF		DELETE	5.1 TITLE			Char	nge	Addition		
NAME		5	5.2 NAME							
STREET ADDRESS		<b>1</b> 5	3.3 STREET	address	i [					
CHTY-S1-ZIP			4 CITY-S	T-21P						
1111.6	<u> </u>	DELETE 6	i TITLE			Char	ige	Addition		
NAM:		1 6	5.2 NAME							
STREET ADDRESS		6	3.3 STREET	address				1		
CITY - ST - ZIF			3.4 CITY - S							
14. I do hereby certify that the information supplied with this fitting does not qualify for the exemption stated in Section 119.07(3)(i), 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 path; that have an other or director of the correction or the recoverage of the second of the correction or the same legal effect as if made under path; that										

Country

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