

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 30, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # P95000081242

1. Entity Name  
CERAMIC SOLUTIONS, INC.



Principal Place of Business  
5410 ANDERSON ROAD  
TAMPA, FL 33614

Mailing Address  
5410 ANDERSON ROAD  
TAMPA, FL 33614



01042008 No Chg-P CR2E034 (11/05)

4. FEI Number  
59-3349916

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

HILTON, HENRY G  
5410 ANDERSON ROAD  
TAMPA, FL 33614

**DO NOT WRITE  
IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	P,D
NAME	HILTON, HENRY G III
STREET ADDRESS	5410 ANDERSON ROAD
CITY-ST-ZIP	TAMPA, FL 33614
TITLE	S
NAME	WILLIAMS, RHONDA
STREET ADDRESS	5410 ANDERSON ROAD
CITY-ST-ZIP	TAMPA, FL 33614
TITLE	T
NAME	HILTON, DONNA
STREET ADDRESS	5410 ANDERSON ROAD
CITY-ST-ZIP	TAMPA, FL 33614
TITLE	VP
NAME	TRAPANI, THERESA
STREET ADDRESS	5410 ANDERSON ROAD
CITY-ST-ZIP	TAMPA, FL 33614
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000804105  
02/05/08-80055-003 150.00

**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:

*Hank Hilton*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/08  
Date

813-889-8453  
Daytime Phone #