

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 26, 1999 8:00 am  
Secretary of State

04-26-1999 90237 016 \*\*\*150.00

DOCUMENT # P95000094739

1. Corporation Name

COLTEC INTERNATIONAL CO., INC.

Principal Place of Business

1639 FORUM PLACE  
SUITE 4  
WEST PALM BEACH FL 33401  
US

Mailing Address

1639 FORUM PLACE  
SUITE 4  
WEST PALM BEACH FL 33401  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/14/1995

4. FEI Number

65-0650829

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 owes the current year intangible  
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21 521 LAKE AVE.

2a. Mailing Address

26 521 LAKE AVE.

Suite, Apt. #, etc.

22 SUITE 4

Suite, Apt. #, etc.

27 SUITE 4

City & State

23 LAKE WORTH, FLORIDA

City & State

28 LAKE WORTH, FLORIDA

Zip

24 33460

Country

25 USA

Zip

29 33460

Country

30 USA

9. Name and Address of Current Registered Agent

GEORGE D. PSINOS, P.A.  
1655 PALM BEACH LAKES BLVD.  
STE 106  
WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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:

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
DP  
GILDE, ROGER L  
1639 FORUM PLACE STE. 4  
WEST PALM BEACH FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

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STREET ADDRESS  
CITY-STATE-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

14. I hereby certify that the information supplied with this filing 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 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 change 1, or on an attachment with an address, with all other life empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/99

561/547-8131

CR2E034 (11/98)