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

**PROFIT** CORPORATION ANNUAL REPORT

1997

23

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FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P96000056005 (7)

Country

SEALCOAT SYSTEMS, INC.

Principal Place of Business Mailing Address 8108 NW 74TH AVE 8108 NW 74TH AVE TAMARAC FL 33321 TAMARAC FL 33321-4832 3. Date Incorporated or Qualified 06/28/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0673278 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc 5. Certificate of Status Desired 22 27 City & State City & State 6. Election Campaign Financing

28

Zip

This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes \(\sigma\) No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DOUGLASS, BRADLEY 8108 NW 74TH AVE 82 Street Address (P.O. Box Number is Not Acceptable) TAMARAC FL 33321 83 City Zip Code

Country

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 hank of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIPECTORS IN 12 12. OFFICERS AND DIRECTORS 13. (96/6) Addition Change TT DELETE TILE 1.1 TITLE DOUGLASS, BRADLEY NAME 1.2 NAME 8108 N.W. 74th Ave 11220 NW 39TH ST 1.3 STREET ADDRESS STREET ADDRESS CORAL SPRINGS FL 33065 CHTV - S1 - 7IP 1.4 CITY - ST-ZIP DELETE ☐ Change Addition 21 TITLE TITLE 2.2 NAME NAME STREEL ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIF Change DELETE Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP City - \$1 - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE THEF NAME 5.2 NAME STREET ACIDRESS 5.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I do 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 changed, or on an attachment with an address

5.4 City - ST - ZIP

**6.3 STREET ADDRESS** 

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-SI-7P

STREET ADDRESS

HILE

NAME

DELETE

4-10-97

954-726-0823

Change

Addition

FILED

Apr 18 1997 8:00am

Secretary of State

Trust Fund Contribution

3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable