

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2002 8:00 am
Secretary of State

04-17-2002 90013 023 ***150.00

DOCUMENT # P96000096131

1. Entity Name
NU-COAT INDUSTRIES, INC.

Principal Place of Business

**7709 WEST 20TH AVENUE
HIALEAH FL 33014**

Mailing Address

**7709 WEST 20TH AVENUE
HIALEAH FL 33014**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0718946

Applied For

Not Applicable

5. Certificate of Status Desired... ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HAMILTON, BARCLAY M
7709 WEST 20TH AVENUE
HIALEAH FL 33014**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **ABBATE, FLORIO J**
STREET ADDRESS **13925 NORTHWEST 60TH AVENUE**
CITY-ST-ZIP **MIAMI LAKES FL 33014**

TITLE **D** ☐ Delete
NAME **ALOI, FRANK A**
STREET ADDRESS **7441 NORTHWEST 6TH STREET**
CITY-ST-ZIP **PLANTATION FL 33317**

TITLE **D** ☐ Delete
NAME **HAMILTON, BARCLAY M**
STREET ADDRESS **795 NORTHWEST 155TH TERRACE**
CITY-ST-ZIP **PEMBROKE PINES FL 33028**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other duly empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

BARCLAY HAMILTON **4/5/02** **305-828-1701**

CR2E034 (9/01)