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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000097350 (8)

INTERNATIONAL SURFACES, INC.

- 1 100/1001 192 101/0 0/1/1 001/1 001/1 001/1 20/1/ 10/1/1 100/4 1/1/1 01/1/ 00/1/

FILED

Mar 19 1998 8:00am

Secretary of State

Dringing Ding	e of Business	Mailwa Address				
Principal Place of Business Mailing Address						
6189 TAYLOR RD NAPLES FL 34109		P O BOX 7063 FT MYERS FL 33911			DO NOT WRITE IN THIS SPACE	
US		us			3. Date incorporated or Qualified	
					11/14/1996	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number Applied For	
21 6220 - 1 Topaz Ct. 26 Suite, Apt. #, etc.					65-0699835 Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc					5. Certificate of Status Desired S8.75 Additional	
22 FT /	Myers FL	27			Fee Required	
City & State					Election Campaign Financing \$5.00 May Be	
23 339	339/2 USA 28			 	Trust Fund Contribution Added to Fees	
24P	Country	Zip	Country	,	8. This corporation owes or has paid the current year Intangible	
24	25 9. Name and Address of Current	29 30	<u> </u>		Personal Property Tax due June 30. X Yes No 10. Name and Address of New Registered Agent	
500		nogratored Agent	81	Name		
li e	TTINGLY, BILL A					
3949 EVANS AVE			82	Street	Address (P.O. Box Number is Not Acceptable)	
SUITE 104 FT MYERS FL 33901			83			
r,	MTERS FL 33901					
			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 product name of registered agent and title if apply after (NOTE Registered Agent signature required when reinstaling) DATE						
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TALE	D	☐ DELETE	1.1 TITLE		Sect./TReasurer	
NAME	MATTINGLY, WILLIAM E		1.2 NAME		Mattingly, Doris M. 3203 Mc Gregor BLVO.	
STREET ADDRESS	3203 MCGREGOR BLVD		1.3 STREET	ADORESS	3203 Mc Gregor BLVO.	
CITY-ST-ZIP	FT MYERS FL 33901		1.4 CITY - 9		FORT MYERS FL 33901	
TITLE	D	DELETE	21 TITLE		Change Addition	
NAME	ESPAGNOL, DIEGO P		22 NAME			
STREET ADDRESS	6141 SUPERIOR BLVD		2.3 STREET	ADDRESS		
CITY-ST-ZIP	DAVIE FL 33331		2 4 CITY-	ST-ZIP		
TITLE	D	DELFTE	31 TITLE		☐ Change ☐ Addition	
NAME	WEAVER, MICHAEL W		32 NAME			
STREET ADDRESS	4420 LARKSPUR CT		3 3 STREET	ADDRESS		
CITY-ST-ZIP	PORT CHARLOTTE FL 33948		3 4. CiTY-	ST - ZIP		
TITLE .		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition	
RAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET			
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		4.4 CITY-S	T-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.9 STREET			
CITY-ST-ZIP			5.4 CITY - S	1 - ZtP		
TITLE		DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP			6.4 CITY-S	1 - 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 trusted 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.

LL DORIS M. Mattingly 3/8/98