## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P97000056634

Entity Name: PCI COATINGS, INC.

**FILED** Mar 16, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3800 NW 2ND AVE 22062 CONCHA AVENUE BOCA RATON, FL 33431 BOCA RATON, FL 33428

**Current Mailing Address: New Mailing Address:** 

22062 CONCHA AVENUE BOCA RATON, FL 33428

FEI Number: 65-0761541 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

KRUSEN, W ANDREW JR LEWIS, DAVID J 712 S. OREGON AVE. SUITE 200 22062 CONCHA AVENUE TAMPA, FL 33606 BOCA RATON, FL 33428 US

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: DAVID J. LEWIS 03/16/2006

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Name:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition

KRUSEN, W.A. JR LEWIS, DAVID J Name: Name: 712 S. OREGON AVE. SUITE 200 22062 CONCHA ANUE Address: Address:

City-St-Zip: TAMPA, FL 33606 City-St-Zip: BOCA RATON, FL 33428

Title: VΡ Title: VΡ (X) Change ( ) Addition () Delete Name: LEWIS, DAVID J Name: BLACKINGTON, DONNA M 3800 NW 2ND AVE 22062 CONCHA AVENUE Address: Address:

Title: Title: TS (X) Delete () Change () Addition

BOCA RATON, FL 33431 BOCA RATON, FL 33428 City-St-Zip: City-St-Zip:

JONES, D N Name: 712 S. OREGON AVE. SUITE 200 Address: Address: City-St-Zip: TAMPA, FL 33606 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID J LEWIS PD 03/16/2006