

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

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FILED
Jun 12, 2006 8:00 am
Secretary of State

05-01-2006 90292 021 ***150.00

DOCUMENT # P97000101409					
1. Entity Name SUNCOAST SOLID SURFACES, INC.					
Principal Place of Business 244 BLUE JUNIPER BLVD. VENICE FL 34292			Mailing Address 244 BLUE JUNIPER BLVD. VENICE FL 34292		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number 65-0787827				Applicable For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KING, CLIFFORD M 2033 MAIN STREET 303 SARASOTA FL 34237			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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature of person or previous name of registered agent has a separate (NOTE: Registered Agent signature required on every filing) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	NAME	STREET ADDRESS	TITLE	NAME	STREET ADDRESS
	PO LIONETTI, GERARD	244 BLUE JUNIPER BLVD. VENICE FL 34292			
	STD LIONETTI, GLORIA M	244 BLUE JUNIPER BLVD. VENICE FL 34292			
	VD GOOD, MARCUS	244 BLUE JUNIPER BLVD VENICE FL 34292			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: <i>Gerard Lionetti</i>			4-13-06 941-412-3455		
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR, OFFICER OR SECRETARY			DATE		