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

PROFIT **CORPORATION** ANNUAL REPORT

1998

**2011年的中国** 

1 1



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000104243 (5)

SPECIALTY COATING, INC.

## **FILED** Apr 09 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address				
1317 N FEDERAL HWY LAKE WORTH FL 33460		1317 N FEDERAL HWY LAKE WORTH FL 33460				
						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						12/10/1997
2. Principal Pl	ace of Business	2a. Mailing Address			_	4. FEI Number Applied For
អា		26	26			65-080049, Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			SR 75 Additional
12		27				Certificate of Status Desired     Fee Required
City & State		City & State	<u> </u>			6. Election Campaign Financing \$5.00 May Be
n l		28				Trust Fund Contribution Added to Fees
Zip Country		Zip Country				
<b>つ</b> ・	26 29 30		⊢¬			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
						10. Name and Address of New Registered Agent
KING, MARK				"	IVALITIE	
	31 NW 81 TERR		82 Street		Street #	Address (P.Ö. Box Number is Not Acceptable)
LAI	UDERHILL FL 33351					
				[63]		
					00	
				64	City	FI 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	22 and 607 1508. Florida Statu	ites the e	hove	-named	corporation submits this statement for the purpose of changing its registered
office or re	egistered agent, or both, in the State	of Florida. Such change was	authorize	d by	the corp	poration's board of directors. I hereby accept the appointment as registered
agent, 1 a	m familiar with, and accept the oblig	iations of, Section 607.0505, F	lorida Sta	itutes		
SIGNATURE						
				islared Agent signature requir		
12.			13.		—	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1,1 Ti	-	- 1	☐ Change ☐ Addition
NAME			1.2 N	IAME	ĺ	
STREET ADDRESS			1.3 S	TREET	ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL 33460		1.4 City-1		1-21P [	
TITLE		DELETE	2.1 TITLE			☐ Change ☐ Addition
KAME			2.2 NAME		ļ	,
STREET ADDRESS				2.3 STREET ADDRESS		
				2. 4 CITY-ST-ZIP		
CITY-ST-ZIP		DELETE	2.4 C		I-ZIP	Change Addition
TITLE		Otten			l	Change C Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 S	TREET	address	
CITY-ST-ZIP			3.4. CITY - ST - ZIP		T-ZIP	
TITLE		DELETE	4.1 Ti	ITLE	I	☐ Change ☐ Addition
NAME			4.21	NAME	]	
STREET ADDRESS			4.3 STREET ADDRESS		ADDRESS	
CITY-ST-ZIP				4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TI		- 211	Change Addition
					1	crange radition
NAME			5.2 N			
STREET ADDRESS				5.3 STREET ADDRESS		}
CITY-ST-ZIP			5.4 CITY-ST-ZIP		- ZIP	
TITLE		DELETE	6.1 TI	ITLE		Change Addition
NAME			6.2 N	IAME	l	į
STREET ADDRESS			6.3 S	TREET	ADDRESS	†
CITY-ST-ZIP			640	ITY-ST	<sub>r-ZIP</sub> [	
14. I hereby certify that the information supplied with this filing does not qualify for the exe						d in Section 119.07(3)(i), Florida Statutes. I further certify that the information
in all and a second	AC:	-4			4	and the second s

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 a 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 attachnient with an address.

GNATURE:

SIGNATURE: