


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

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Jul 30, 1999 8:00 am
Secretary of State

07-30-1999 90002 004 ***558.75



PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000007845					
1. Corporation Name KILAMINJARO THERMOSET COATINGS WORLDWIDE, INCORPORATED					
Principal Place of Business 5311 S.W. 182ND TERR. FT. LAUDERDALE FL 33331			Mailing Address 5311 S.W. 182ND TERR. FT. LAUDERDALE FL 33331		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 1100 LEE WAGENER BLVD		26 1100 LEE WAGENER BLVD		01/26/1998	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22 SUITE 200		27 SUITE 200		65-0809067	
City & State		City & State		Applied For	
23 FT. LAUDERDALE, FL		28 FT. LAUDERDALE, FL		<input type="checkbox"/> Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24 33315		29 33315		<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing	
25 BROWARD		30 BROWARD		<input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
POPLASK, ARIEL ESQ. 930 SOUTH STATE ROAD 7 PLANTATION FL 33317			81 Name KELLY KESTER, ESQ.		
			82 Street Address (P.O. Box Number is Not Acceptable)		
			1100 LEE WAGENER BLVD		
			83 SUITE 200		
			84 City FT LAUDERDALE FL 85 Zip Code 33315		
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 Kelly Kester Kelly Kester 7/12/99					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE VP, D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition					
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY-ST-ZIP					
2.1 TITLE P, D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition					
2.2 NAME JOHN GOODWIN					
2.3 STREET ADDRESS 1100 LEE WAGENER BLVD. SUITE 200					
2.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33315					
3.1 TITLE SEC, D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition					
3.2 NAME KELLY KESTER					
3.3 STREET ADDRESS 7708 BALBOA ST.					
3.4 CITY-ST-ZIP SUNRISE, FL 33351					
4.1 TITLE TREA, D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition					
4.2 NAME RICHARD KESTER					
4.3 STREET ADDRESS 8400 N.W. 36TH DRIVE					
4.4 CITY-ST-ZIP CORAL SPRINGS, FL 33065					
5.1 TITLE					
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY-ST-ZIP					
6.1 TITLE					
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY-ST-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 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 attachment with an address, with all other like empowered.

SIGNATURE: **Richard Kester, TREA** **RICHARD KESTER, TREA**

7/12/99

954-359-4355

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (11/98)

0317849